CSUSM Corporation

Mr. Charles Ragland
Community Member (Alumni)
Department of Justice

Dr. Chuck De Leone
Professor, Physics

Dr. Cynthia Chavez Metoyer
Faculty Director,
Community Engagement-
Office of Internships

Vacant
Student Member

Dr. Graham Oberem
Designated Member
Provost

Mr. Jason Schreiber
Dean of Students

Ms. Jennifer Williams
Designated Member
President's Designee
AVP of Campus Climate and
Chief of Staff, Office of
President Karen S. Haynes

Mr. Neal Hoss
Designated Member
Vice President for
Finance & Administrative
Services

Mr. Rextini Andrade
Student Member

Mr. Xavier Martinez
Community Member
Martinez & Associates, Inc.,
San Marcos

REVISED - Regular Meeting of the Board of Directors

Thursday, May 24, 2018 - 4:00 p.m. – 5:30 p.m.
Center for Children and Families Classroom

I. **Convening of Regular Board Meeting** *(Oberem)*
   A. Consideration of Minutes November 16, 2017 Regular Meeting **(Attachment A)**

II. **University Update and Committee Reports**
   A. Administration Update *(Newberg)*
   B. Executive Committee Update *(Hoss)*
   C. Extended Learning Building/P3 Project Update *(Newberg)*
   D. Investment Report 3/31/18 *(Fenimore)* **(Attachment B)**
   E. Joint Audit Committee Update *(Martinez)*
   F. Sponsored Projects Update *(Oberem/Beckwith)*
   G. Student Housing Advisory Committee Update *(Schreiber/Newberg)*
   H. University Update *(Williams)*

III. **Consent Agenda from the following Committees:** *(Oberem)*

Finance and Operations Committee

Brought forward from the March 9, 2018 Meeting:
   A. Quarterly Financial Report 12/31/17 & Summary **(Attachment C)**
   B. Revised FY 17/18 Operating Budget & Resolution **(Attachment D)**
   C. Compensation Structure Revisions **(Attachment E)**
      a. Student Assistant Classification and Salary Guide
      b. Position Matrix for Professional Staff Positions

Brought forward from the May 15, 2018 Meeting:
   A. Revised Procurement Policy **(Attachment F)**
   B. Revised Property Control Policy **(Attachment G)**
   C. Revised Post Retirement Benefit Policy **(Attachment H)**
   D. New Cost Principle Policy **(Attachment I)**
   E. Compensation Administration Guidelines FY18/19 **(Attachment J)**
   F. Quarterly Financial Report 3/31/18 & Summary **(Attachment K)**
   G. FY 18/19 Corporation Budget & Resolution **(Attachment L)**
      a. Operating Budget
      b. Student Housing Budget

Joint Audit Committee

Brought forward from the March 29, 2018 meeting:
   A. Form 990 Tax Return FY 16/17 Ratification **(Attachment M)**

IV. **Action Items**
   ~~A. Nomination of Student Member to the Board of Directors *(Newberg)* **(Attachment N)**~~

Action Items Continued

B. Nomination of Student Member to the Student Housing Advisory Committee *(Newberg)* **(Attachment N)**
C. Nomination of Faculty Members to the Sponsored Projects Committee *(Newberg)* **(Attachment O)**
D. Proposed FY 18/19 Meeting Calendar *(Newberg)* **(Attachment P)**
E. Extension of Coffee Cart Agreement *(Newberg)*

V. **Adjournment of Regular Meeting** (*Oberem)*

Next Proposed Meeting: September 27, 2018, 4:00 p.m., Center for Children & Families Classroom

ATTACHMENT A

Minutes of the November 16, 2017 Regular Meeting

CSUSM Corporation

Minutes of the Regular Meeting of the Board of Directors
November 16, 2017
Center for Children and Families Classroom

Attendees
Members: Graham Oberem (Chair), Neal Hoss, Chuck De Leone, Cynthia Chavez Metoyer, DawnMarie Myers, Jason Schreiber, Rex Andrade @ 4:10
Members Absent: Xavier Martinez, Jennifer Williams, Charles Ragland
Staff: Deborah Davis, Bella Newberg, Cynthia Fenimore, Michelle Hinojosa, Trina Beckwith, Karla Frazee, Janelle Temnick
Guests: n/a

Convening of the Regular Meeting
A quorum being present, Chair Oberem called the meeting to order at 4:06 p.m.

Minutes of the September 14, 2017 Annual Meeting
A motion was made and seconded (Chavez Metoyer/De Leone) to approve the September 14, 2017 Annual Meeting minutes. Motion carried.

Minutes of the September 14, 2017 Regular Meeting
A motion was made and seconded (Chavez Metoyer/De Leone) to approve the September 14, 2017 Regular Meeting minutes. Motion carried.

Committee Reports
Administration Update
Newberg reported on staffing changes that have taken place within CSUSM Corporation. February 1, 2018 is target date for CSUSM Corporation's move back to Campus. We will no longer be leasing the basement at Carmel St. as of 12/31/2017. Newberg reported on the renegotiated terms of the QUAD Affiliation Agreement. The renegotiated terms include:

a. A 24 year term
b. Continue to provide Residential Education, Police and IITS on the property
c. Priority period will not be renewed
d. Considerations to include renovations to the QUAD
e. Summer resident revenue
f. Summer Conference revenue
g. Campus master plan

The renegotiation places the Corporation in a much stronger position providing an end date as well as defining the terms more clearly. The renegotiated QUAD Affiliation Agreement will be voted on later in the meeting. Newberg reported CSUSM Corporation will enter into a separate 10 year lease for campus dining space within the QUAD.

Oberem included the Awards Report in the Sponsored Projects Committee update. Beckwith added that moving forward she thought it would be helpful if the awards report distinguished between new and continuing awards, the Committee agreed.

Student Housing Advisory Committee Update

Schreiber reported that the Student Housing Advisory Committee not only deals with student housing but dining as well. Schreiber reviewed the mandatory meal plan options for incoming freshmen, RA's, faculty and staff. A dining exemption process is being developed for students with health, religious or financial concerns or for students who may have dietary restrictions. The City will need to approve the name of the facility once it's been decided on. Regarding student housing, Schreiber reported that the Committee is working on integrating billing with PeopleSoft, improving housing exemptions and future planning of housing needs and requirements.

University Update

Hoss reported on Executive Orders 1100 and 1110 issued by the Chancellor's Office. Provost Oberem submitted a requested on behalf of the University, with the President's endorsement, a blanket delay on implementing EO 1100. He has not received a reply from the CO as of yet. The Board of Trustees has adopted a support budget to move forward to the Governor. Indicators show the University will receive $55M less than last year's starting point. Benefit cost will be passed on to the University and not funded by the State. Hoss reported on some awards and accolades that CSUSM had recently received. The University was ranked 50th among Western colleges in Washington Monthly's *Best Bang for the Buck* listing. CSUSM received the 2017 Higher Education Excellence in Diversity (HEED) award from *INSIGHT Into Diversity* magazine. *U.S. News and World Report* ranked CSUSM tied for 76th overall in Regional Universities West. Our Applied Behavior Analysis program was ranked among the 62 best in the nation by the independent publishing group *Applied Behavior Analysis EDU*. CSUSM was ranked 70th on *The Hispanic Outlook on Education* magazine's list of Bachelor's Degrees Granted to Hispanics.

Consent Agenda

Oberem explained that a Consent Agenda was included as Item III in the meeting Agenda. He explained the purpose of the Consent Agenda. Oberem asked if anyone had any questions about the Consent Agenda process. There being none Oberem then asked if anyone wanted to move any items from the Consent Agenda to the Regular Agenda. There being none, *a motion comes moved and seconded (De Leone/Chavez Metoyer) to approve the UARSC Financial Audit Report & Uniform Guidance Compliance Report (A-133) 6/30/17 (Attachment E) and UCorp Financial Audit Report 6/30/17 (Attachment F) moved forward from the Joint Audit Committee. Motion carried.*

Action Items

The Regular Meeting adjourned by acclamation at 5:35 p.m.

_____ _____

Cynthia Chavez Metoyer
Secretary

Date

ATTACHMENT B

Investment Report 3/31/18

California State University San Marcos Corporation

Investment Activity for the Quarter Ended March 31, 2018

	Beginning Investment Value	Income	Purchases	Maturities and Sales	Cash Withdrawal and Deposits	Change in Market Value	Ending Investment Value
CD's	$ 2,395,799	$ 10,683				$ (5,910)	$ 2,389,889
Mutual Funds	2,284,094	9,114	19,170			(6,910)	2,305,469
Cash	8,828	21			(8,487)		362
TOTAL	**$ 4,688,721**	**$ 19,819**	**$ 19,170**	**$ -**	**$ (8,487)**	**$ (12,820)**	**$ 4,695,720**

Name	Type	*January 2018* Income	*February 2018* Income	*March 2018* Income	*TOTAL* Income
CAPITAL 1.05% 080318	CD		$ 1,297		$ 1,297
FIRSTBANK PR 0.9%020117	CD				-
Goldman Sachs Bk USA	CD	2,100			2,100
Everbank CPN 1.550% 101717	CD				-
MB Financial Bank NA	CD	343	310	343	997
Comenty Bank CPN 1.950% 110417	CD	331	331	299	962
Discover Bank 02/02/17	CD		1,853		1,853
American Express CENT BNK	CD			2,308	2,308
Ally Bank	CD			1,167	1,167
BARCLAYS 1.2% 073117	CD				-
Pimco Unconstrained-PUBAX	MF	1,397	1,348	1,420	4,165
Pimco FDS PAC Inv MGM - PTLAX	MF	733	646	743	2,121
Pimco FDS PAC Inv Mgmt-PSHAX	MF	925	896	1,007	2,828
Cash		2	3	17	21
		$ 5,831	**$ 6,683**	**$ 7,305**	**$ 19,819**

Investment Earnings	*Quarter 1*	*Quarter 2*	*Quarter 3*
Income	$ 13,381	$ 34,798	$ 19,819
Change in Market Value	11,277	(29,940)	(12,820)
CD's Accrued Interest	508	1,966	(1,693)
Investment Earnings	**$ 25,166**	**$ 6,824**	**$ 5,305**

Fiscal Year to Date Investment Earnings ***$ 37,295***

ATTACHMENT C

Quarterly Financial Report 12/31/17 & Summary

California State University San Marcos Corporation
Statement of Financial Position
December 31, 2017

	Balance 12/31/2017	Balance 9/30/2017	Quarter Increase/ (Decrease)
Assets			
Cash and Short-Term Investments	$ 10,059,008	$ 12,952,015	$ (2,893,007)
Accounts Receivable-Sponsored Programs	2,976,389	2,109,875	866,514
Other Receivable	1,449,136	1,123,299	325,837
Other Assets	103,302	119,265	(15,963)
Housing Bldg & Equipment (Net)	18,465,977	18,517,113	(51,136)
CCF-Bldg & Fixtures (Net)	4,195,630	4,266,878	(71,248)
Property & Equipment (Net)	6,743,378	4,837,490	1,905,888
Total Assets	**$ 43,992,820**	**$ 43,925,935**	**$ 66,885**
Liabilities & Net Assets			
Liabilities:			
Accounts Payable and Accrued Expenses	1,759,527	$ 1,792,976	$ (33,449)
Deferred Revenue	8,740,781	9,096,433	(355,652)
Notes Payable - CSUSM	198,291	198,291	-
Post-Retiree Health Benefit Accrual	1,504,995	1,484,672	20,323
Bond Payable - Housing	19,044,325	19,896,734	$ (852,409)
Total Liabilities	**$ 31,247,919**	**$ 32,469,106**	**$ (1,221,187)**
Net Assets:			
Unrestricted:			
Operating Reserves	$ 2,072,104	$ 1,888,719	$ 183,385
Campus/Designated Programs	2,478,597	2,527,841	(49,244)
Administrative Current Year Net Activity	449,803	136,999	312,804
Housing & Residential Life	3,214,525	2,600,409	614,116
CCF-Bldg & Fixtures	4,195,630	4,266,878	(71,248)
Property & Equipment	334,242	35,983	298,259
Total Net Assets	**$ 12,744,901**	**$ 11,456,829**	**$ 1,288,072**
Total Liabilities & Net Assets	**$ 43,992,820**	**$ 43,925,935**	**$ 66,885**

California State University San Marcos Corporation
Administrative Operating Summary
7/1/17 to 12/31/17

	Annual Budget FY 17/18	Quarter 2 10/1/17 to 12/31/17 Budget	Actual	Variance	Fiscal Year To Date 7/1/17 to 12/31/17 Budget	Actual	Variance	Comparison of Prior FYTD Actual to Current FYTD Actual Prior FYTD 12/31/16	Current FYTD 12/31/17	% Increase (Decrease)
Revenue										
Net Grant/Contract Admin Fees	$ 898,449	$ 224,612	$ 224,613	$ 0	$ 449,225	$ 449,225	$ -	$ 492,660	$ 449,225	-9%
Admin Fees - Campus Programs	135,000	33,750	31,029	(2,721)	67,500	63,141	(4,359)	124,117	63,141	-49%
Follett-Bookstore Commission	333,000	16,650	28,908	12,258	166,500	173,846	7,346	180,773	173,846	-4%
Sodexo Commission	100,000	25,000	-	(25,000)	50,000	-	(50,000)	-	-	-
Other Commercial Services Revenues	165,360	41,340	53,954	12,614	82,680	69,873	(12,807)	53,070	69,873	32%
Housing	498,000	124,500	124,500	-	249,000	249,000	-	-	249,000	-
Summer Conferences	75,000	18,750	150,710	131,960	37,500	150,710	113,210	-	150,710	-
Investment Income	30,000	7,500	6,823	(677)	15,000	31,989	16,989	47,534	31,989	-33%
Exchange of Value - CSUSM	243,552	60,888	60,888	-	121,776	121,576	(200)	222,500	121,576	-45%
Space Rental	62,760	15,690	15,690	-	31,380	31,380	-	69,546	31,380	-55%
Other Revenue	29,000	7,250	120,493	113,243	14,500	140,140	125,640	36,700	140,140	282%
Total Revenue	**$ 2,570,121**	**$ 575,930**	**$ 817,608**	**$ 241,678**	**$ 1,285,061**	**$ 1,480,880**	**$ 195,820**	**$ 1,226,900**	**$ 1,480,880**	21%
Post-Retirement	$ 140,000	$ 35,000	$ 20,323	$ 14,677	$ 70,000	40,646	$ 29,354	$ 80,621	40,646	-50%
Expenses: Admin Operations	2,321,732	580,433	484,481	95,952	1,160,866	990,431	170,435	908,962	990,431	9%
Net Operating Revenues	**$ 108,389**	**$ (39,503)**	**$ 312,804**	**$ 352,307**	**$ 54,195**	**$ 449,803**	**$ 395,609**	**$ 237,317**	**$ 449,803**	90%

California State University San Marcos Corporation
Program Revenue Activity Summary
7/1/17 to 12/31/17

Program Activity	Annual Budget FY17/18	Quarter 2 10/1/17 to 12/31/17 Budget	Quarter 2 10/1/17 to 12/31/17 Actual	Quarter 2 10/1/17 to 12/31/17 Variance	Fiscal Year To Date 7/1/17 - 12/31/17 Budget	Fiscal Year To Date 7/1/17 - 12/31/17 Actual	Fiscal Year To Date 7/1/17 - 12/31/17 Variance	Comparison of Prior FYTD Actual to Current FYTD Actual: Prior FYTD 12/31/16	Comparison of Prior FYTD Actual to Current FYTD Actual: Current FYTD 12/31/17	Comparison of Prior FYTD Actual to Current FYTD Actual: % Increase (Decrease)
Grants/Contracts										
Federal	$ 9,903,935	$ 2,475,984	$ 2,777,600	$ 301,617	$ 4,951,968	$ 4,644,281	$ (307,686)	$ 3,801,841	$ 4,644,281	22%
Other Grants/Contracts	1,096,065	274,016	294,041	20,025	548,033	705,250	157,218	437,572	705,250	61%
Total Grants/Contracts	**$ 11,000,000**	**$ 2,750,000**	**$ 3,071,641**	**$ 321,641**	**$ 5,500,000**	**$ 5,349,531**	**$ (150,469)**	**$ 4,239,413**	**$ 5,349,531**	26%
Campus/Designated Programs	**2,072,020**	**518,005**	**449,383**	**(68,622)**	**1,036,010**	**1,121,793**	**85,783**	**1,703,692**	**1,121,793**	-34%
Housing/Residential Life	**6,053,471**	**1,953,552**	**1,982,275**	**28,723**	**3,240,113**	**3,307,747**	**67,634**	**-**	**3,307,747**	-
Total Program Revenues	**$ 19,125,491**	**$ 5,221,557**	**$ 5,503,299**	**$ 281,742**	**$ 9,776,123**	**$ 9,779,071**	**$ 2,948**	**$ 5,943,105**	**$ 9,779,071**	65%

ATTACHMENT D

Revised FY 17/18 Operating Budget & Resolution

FY2017-2018 Revised Budget

Administration	Original Budget	Budget Adjustment	Full Year Revised Budget	Dec YTD Actuals	Jan - Jun Forecast	Full Year Forecast
Total Revenues	2,570,121	197,515	2,767,636	1,480,880	1,286,756	2,767,636
Total Expenditures	2,321,732	72,716	2,394,448	990,431	1,404,017	2,394,448
Net Income/(Net Loss) Before Post Retirement Expenses	**248,389**	**124,799**	**373,188**	**490,449**	**(117,261)**	**373,188**
Post Retirement Expenses	140,000	(58,708)	81,292	40,646	40,646	81,292
Net Income/(Net Loss) After Post Retirement Expenses	**108,389**	**183,507**	**291,896**	**449,803**	**(157,907)**	**291,896**

Account Category	Original Budget	Budget Adjustment	Full Year Revised Budget	Dec YTD Actuals	Jan - Jun Forecast	Full Year Forecast
504 - Sales and Services of Auxiliary Enterprises [a]	62,760	(31,380)	31,380	31,380	0	31,380
505 - Reimbursements [b]	0	105,182	105,182	105,182	0	105,182
506 - Transfers In From Other Funds/Appropriations	498,000	0	498,000	249,000	249,000	498,000
508 - Revenue from Investments	30,000	0	30,000	31,989	(1,989)	30,000
580 - Other Financial Sources [c]	1,979,361	123,713	2,103,074	1,063,329	1,039,745	2,103,074
Total Revenue	**2,570,121**	**197,515**	**2,767,636**	**1,480,880**	**1,286,756**	**2,767,636**
601 - Regular Salaries and Wages [d]	726,272	183,133	909,405	319,033	590,372	909,405
603 - Benefits Group	284,823	(10,601)	274,222	123,954	150,268	274,222
604 - Communications	9,688	0	9,688	3,979	5,709	9,688
605 - Utilities Group	31,172	46	31,218	(4,138)	35,356	31,218
606 - Travel	20,600	7,320	27,920	4,503	23,418	27,920
607 - Capital Outlay Projects [e]	25,347	(25,347)	0	0	0	0
612 - State Pro Rata Charges Group	5,581	0	5,581	2,791	2,791	5,581
613 - Contractual Services Group [f]	149,250	21,320	170,570	81,925	88,645	170,570
616 - Information Technology Costs	12,884	8,870	21,754	14,732	7,023	21,754
617 - Services from Other Funds/Agencies Group [g]	83,000	(50,343)	32,657	16,329	16,329	32,657
660 - Misc. Operating Expenses [h]	973,115	(61,682)	911,433	427,325	484,108	911,433
Total Expense	**2,321,732**	**72,716**	**2,394,448**	**990,431**	**1,404,017**	**2,394,448**
Net Income/(Net Loss) Before Post Retirement Expenses	**248,389**	**124,799**	**373,188**	**490,449**	**(117,261)**	**373,188**
Benefits Post Retirement Health [i]	140,000	(58,708)	81,292	40,646	40,646	81,292
Net Income/(Net Loss) After Post Retirement Expenses	**108,389**	**183,507**	**291,896**	**449,803**	**(157,907)**	**291,896**

Student Housing	Original Budget	Budget Adjustment	Full Year Revised Budget	Dec YTD Actuals	Jan - Jun Forecast	Full Year Forecast
Rental Revenue	5,426,149	122,531	5,548,680	2,878,124	2,670,556	5,548,680
Expenditures	3,588,817	191,550	4,298,016	2,388,043	1,909,973	4,298,016
Capital Expenditures					594,211	594,211
Net Revenue Projected - June 30, 2018						**656,453**

Student Housing Fund Balance	
Net Assets Transferred from UCORP @ June 30, 2017	2,510,212
Net Revenue Projected as of June 30, 2018	656,453
Projected Fund Balance @ June 30, 2018 before Campus Contribution	3,166,665
Less: Campus Contribution	(500,000)
Student Housing Projected Fund Balance as of June 30, 2018	**2,666,665**

Favorable variance of over $20,000
Unfavorable variance of over $20,000

Budget Adjustments:

(a) Carmel building was vacated 12/31/17 - decrease in rental income from Campus
(b) Higher than projected Summer Resident "QUAD" income
(c) Higher than projected: Summer Conference income, CCF income, AORMA Dividend
(d) Increase in salary expense due to Corp covering B. Newberg & K. Frazee Sal/Bene at 100%, Hiring of Staff
(e) Loan Principal payment moved to Balance Sheet
(f) Increase primarily due to OSP Independent Contractors and Temp Agency staffing needs
(g) Decrease due to Indirect Cost Recovery line items paid through Housing direct
(h) Overall decrease due to line items paid through Housing direct as well as renegotiations with vendors of service contracts
(i) Decrease in expense due to review of Plan Documents and incorporated into actuarial calculations

ATTACHMENT E

Compensation Structure Revisions
Student Assistant Classification and Salary Guide
And
Position Matrix for Professional Staff Positions

CSUSM Corporation
Student Assistant Classification and Salary Guide

Job Class	Student Assistant Level I	Student Assistant Level II	Student Assistant Level III	Student Assistant Level IV
Education/Training	CSUSM Student enrolled in at least six units.	Some education or specialized skills required. CSUSM student	High skill level and education required. CSUSM undergrad or grad student.	High skill level and education or Graduate level coursework required. CSUSM Grad or undergrad.
Work Experience	Not required.	Some job related experience, education or specialized skills required.	Job experience required with some level of responsibility.	Extensive job related experience with high level responsibility.
Level of Independence	Under direct supervision until trained, minimal direction required after training.	Works under general supervision, referring questionable issues to a supervisor. May direct other student employees in routine work assignments.	May be required to use independent judgment to solve problems or make decisions. May direct other student employees in work assignments, as well as supervise in the absence of regular supervisor.	Will be required to use independent judgment to solve problems and/or make decisions, working under minimal supervision sometimes leading project teams. May supervise other student assistants
Job Complexity	Performs routine tasks which require brief training period; limited responsibility, no supervisory assignments other than training of other students employees assigned to perform similar tasks.	In addition to routine tasks, completes specific projects as assigned. Expected to use independent judgment and may be required to make decisions about accomplishing work assignments.	Performance of more complex tasks. Requires individual initiative and limited problem solving abilities; expected to use independent judgment and may be required to make decisions about accomplishing work assignments; sometimes involves supervision of other student assistants.	Assignments and projects are specialized, varied, and complex. Serves as resource and provides lead work direction. Coordinates and completes a wide range of complex and specialized assignments and reports results.
Computer Skills/Keyboard Skills	Knowledge of basic computer software; word-processing, spreadsheet. Use of calculator, basic math skills. Correct use of grammar.	Proficiency using software; word processing, spreadsheet, database. Typing. Thorough knowledge of office procedures.	Substantive technical competence may include web creation, update, and maintenance.	Advanced knowledge of computer software and specialized programs. Unique, unusual, or particularly demanding skills requirements.
Typical tasks	Typical tasks include, but are not limited to: setting up for events, clerical tasks such as filing, photocopying, light typing and general clerical support tasks, basic lab work to include cleaning lab and glassware. Trainee level. Lower level tutoring.	Tasks include, but are not limited to: general clerical tasks, receptionist duties, research and lab assistance, limited accounting support. Peer counseling/advising.	Complicated or technical research: computer analysis and programming; clerical tasks including technical typing and production of complex documents.	Typical tasks include, but are not limited to: media production; complex computer analysis and programming; program coordinator; student supervisor. Advanced research analysis, course instruction.
Workplace Conditions	Typical office environment. May require field work in support of research activity.	Typical office environment. May require field work in support of research activity.	Typical office environment. May require field work in support of research activity.	Typical office environment. May require field work in support of research activity.
FLSA Status	Non-exempt = Overtime pay required	Non-exempt = Overtime pay required	Non-exempt = Overtime pay required	Non-exempt = Overtime pay required
Pay Grade	Student Asst I	Student Asst II	Student Asst III	Student Asst IV
Hourly Pay Ranges	$11.00 - $12.25	$12.00 - $16.00	$15.75 - 18.00	$17.75 - $22.75

NOTES
1) All Job Class requirements remain the same
2) Increase min and max pay rate in each pay range by $.50/hour

07-01-14 (Min Wage Increase); 01-01-16 (Min Wage Increase); 01-01-17 (Min Wage Increase); 01-01-18 (Min Wage Increase)

Revised 4/1/18

CSUSM Corporation Positions and Grades
Effective April 2018

Grade	Classification or Job Title	Rate Ranges* ANNUAL Min	Mid	Max	Rate Ranges* MONTHLY Min	Mid	Max	Rate Ranges* HOURLY Min	Mid	Max
	Non-Exempt Job Titles									
1	Tutor/Mentor Bridges Scholar	22,880	27,331	31,782	1,907	2,278	2,649	11.00	13.14	15.28
2	SI Leader	23,088	28,309	33,530	1,924	2,359	2,794	11.10	13.61	16.12
3	Administrative Support I Researcher I/Research Assistant	28,829	35,859	42,890	2,402	2,988	3,574	13.86	17.24	20.62
4	Research Project Coordinator Administrative Support II Researcher II HR Specialist Sponsored Projects Analyst II Grant Analyst	33,030	41,184	49,338	2,753	3,432	4,111	15.88	19.80	23.72
5	Sponsored Projects Specialist Sponsored Projects Analyst III HR Generalist/Payroll Specialist	38,771	48,506	58,240	3,231	4,042	4,853	18.64	23.32	28.00
6	Executive Assistant	45,552	57,158	68,744	3,796	4,763	5,729	21.90	27.48	33.05

NOTES

Pay Grades 1 - 6

1) Increase min wage in each pay range by $.50
2) Increase max wage by 2% and adjust mid accordingly

CSUSM Corporation Positions and Grades
Effective April 2018

Grade	Classification or Job Title	Rate Ranges* ANNUAL Min	Mid	Max	Rate Ranges* MONTHLY Min	Mid	Max	Rate Ranges* HOURLY Min	Mid	Max
	Exempt Job Titles									
9	Project/Program Specialist I Resident Director	45,760	50,308	54,856	3,813	4,192	4,571			
10	Project/Program Specialist II Fitness & Operations Supervisor Night and Weekend Supervisor	46,820	54,869	62,918	3,902	4,572	5,243			
11	Researcher III (full-time) Research Associate Research Scientist Post Doctoral Researcher Director Outreach Programs	47,880	59,613	71,346	3,990	4,968	5,946			
12	Sponsored Projects Administrator Facilities Maintenance Engineer	48,940	65,958	82,976	4,078	5,497	6,915			
13	Researcher IV Program/Project Directors Finance & Ops Manager	56,523	76,610	96,698	4,710	6,384	8,058			
14	Director, HR & Payroll Director, Business Operations & Finance Director, Sponsored Projects	70,134	94,660	119,188	5,845	7,888	9,932			
15	Chief Financial Officer (CFO)/Sr Director	87,898	113,664	139,430	7,325	9,472	11,619			
16	Executive Director	124,035	161,588	199,142	10,336	13,466	16,595			
	Special Job Titles									
17	Special Consultant	Range of $176 per day to $1,652 per day								

*Special Consultants are considered "employees" and are not designated as independent contractors

Scale Change History

* Add Pay Grade 6 for higher level non-exempt, hourly positions (18% above Pay Grade 5) and Adjustment to Pay Grades 9 - 16 maximum pay rates but no change to the minimum pay rates due to FLSA change halt 12-01-16

* Adjustments to Pay Grades 1 to 6 (5% Pay Grade 1, 3.5% Pay Grades 2 - 6) and min Pay Rates to Pay Grades 9 to 17 due to CA Minimum Wage 01-01-17

* Adjustments to min Pay Grades 1 to 6 and to Pay Grades 9 to 12 due to CA Minimum Wage 01-01-18 and increase all Pay Grades max by 2% and adjust mid accordingly 04-01-18

Approved on: _____ by: _____

NOTES

Pay Grades 9-16

1) Increase min pay rate for exempt level for Pay Grade 9
2) Increase min pay rate for Pay Grades 10-12 to $1,060/year more than Pay Grade below
3) Pay Grades 13-16 min pay rate same
4) Increase max pay rate by 2% and adjust mid accordingly Pay Grades 9-16

Pay Grade 17

1) Increase min daily pay rate to required min wage
2) Increase max daily pay rate by 2%

ATTACHMENT F

Revised Procurement Policy
(Tracked changes and clean version)

California State University SAN MARCOS | CSUSM Corporation

Policy #: 109 Total Pages: 3
Created: 6/18/92
Revision Date: 5/29/97; 10/23/03; 6/10/14
Name Change Revision Date: 2009; 7/1/17
Approved by: Board of Directors

PROCUREMENT POLICY

PURPOSE:

The purpose of this policy is to establish requirements for the procurement of materials, equipment, supplies, and services provided by California State University San Marcos Corporation (CSUSM Corporation).

SCOPE:

This policy applies to all CSUSM Corporation purchases. Procedures are further defined in the CSUSM Corporation's Procurement Guide.

POLICY:

I. All purchases must be approved by the CSUSM Corporation prior to order commitment. Procurements shall be made in a manner that supports and facilitates the competitive bidding process and provides best value consistent with quality, specifications, service and product availability.

   a) Sustainable and/or recycled products shall be considered for procurement in place of non-sustainable/recycled products set forth in the grantor's contract/agreement and the approved budget.

   b) Procurement of goods or services for projects that receive external, federal funding, shall comply with the Office of Management and Budget (OMB) Uniform Guidance (2 CFR 200.317 through 200.326) sponsoring agency policies, and award terms and conditions, as applicable.

   c) Procurement of goods or services for campus programs shall be procured according to this policy, approved by the authorized signer and comply with all CSUSM Corporation policies and procedures.

   d) Procurement shall follow what is customary in the market place for a particular commodity or product and be consummated in such a manner so as to constitute a reasonably prudent and documented business transaction.

   e) System-wide, volume purchase agreements and State Purchasing contracts shall be utilized when deemed to be advantageous to CSUSM Corporation.

   f) Purchases must comply with the letter and spirit of all laws applicable to CSUSM Corporation's business and interest including contract law, and anti-trust laws which prohibit price fixing resulting in the elimination of free competition. Purchases must also adhere to the requirements set forth in the grant or contract agreements.

g) No Corporation Board member, employee or CSU employee, by virtue of their position will violate the Corporation's Code of Conduct by deriving any benefit, gain or receive preferential treatment from the purchase of materials, supplies, equipment or services.

h) Violation of this policy or the Corporation's Code of Conduct may be cause for disciplinary action.

i) Execution of purchase orders, agreements, MOU and all binding contracts shall be consistent with signature authority resolution approved by the CSUSM Corporation Board of Directors.

j) The CSUSM Corporation Executive Director is charged with responsibility of implementing this policy.

II. Sole Source Purchases

Sole source purchases exceeding $50,000, on a non-competitive basis will require written justification and approval by the CSUSM Corporation Executive Director or designee. Written justification must include the following:

a. Description of unique requirements and/or performance factors of the product.
b. Why unique performance requirements/factors are required.
c. What other products have been evaluated, and rejected, and the rational for the rejection.
d. Special circumstances requiring immediate action.

III. Methods of Procurement

Purchases under $5,000: may be approved by the appropriate approving authority. Price quotations are not required to be submitted.

Purchases between $5,000 and $49,999: must be approved by the appropriate approving authority and include three or more informal quotations provided in written or electronic form from the suppliers. Price quotations are required to be submitted.

Purchases between $50,000 and 100,000: must be approved by the appropriate approving authority and include three or more formal quotations provided in written or electronic form from the suppliers. Formal Price quotations are required and must be approved by the Executive Director or designee.

Purchases greater than $100,001: must be approved by the appropriate approving authority and requires a formal Request for Proposal (RFP) or Request for Quotation (RFQ) be issued. Alternatively a system-wide or publically bid contract; or sole source may be used.

Retention of service contractors on an hourly time and material basis are excluded from this process.

PROCUREMENT POLICY

EXCEPTIONS:

The Following are Exceptions to this Policy: Investment management services, insurance services, employee travel, legal services, artists, lecturers, speakers, caterers and real estate activity.

RESOURCES:

Federal Regulations 2 CFR 200.317-.326 2 CFR 200 -- Procurement Standards
Uniform Guidance Frequently Asked Questions

Public Relations Policy
https://www.csusm.edu/corp/businesssrvcesandfinance/policies_proc_forms/pol_busserv_fin_acc/publicrelationsfundspolicy.pdf

Conflict of Interest
https://www.csusm.edu/corp/businesssrvcesandfinance/policies_proc_forms/pol_hrpr/corp202coiboardandemployeespolicy.pdf

California State University SAN MARCOS | CSUSM Corporation

Policy #: 109 Total Pages: 3
Created: 6/18/92
Revision Date: 5/29/97; 10/23/03; 6/10/14
Name Change Revision Date: 2009; 7/1/17
Approved by: Board of Directors

PROCUREMENT POLICY

PURPOSE:

The purpose of this~~This~~ policy is~~applies~~ to establish requirements for the procurement~~purchase~~ of materials, equipment, supplies, and services provided by~~paid from~~ California State University San Marcos Corporation (CSUSM Corporation). ~~) administered funding sources. This policy blends efficient business practices and governing policies which satisfy the requirements of federal, state and independent auditors. Travel, retention of artists, entertainers, catering and speakers are not subject to the provisions of this policy.~~

SCOPE:

This policy applies to all CSUSM Corporation purchases. Procedures are further defined in the CSUSM Corporation's Procurement Guide.

POLICY:

All purchases~~Purchase Orders~~ must be approved by the ~~CSUSM Corporation prior to commitment; accordingly, a Purchase Order form must be submitted to~~ CSUSM Corporation prior to order commitment. Procurements~~making purchases within the guidelines of this policy and procedure.~~

I. ~~Purchases~~ shall be made in a manner that supports and facilitates the competitive bidding process and provides best value~~at the lowest cost~~ consistent with quality, specifications, service and product availability.

~~II. Sustainable Projects which receive external funds for support may be subject to additional agency restrictions~~ and/or ~~Federal Office of Management and Budget Circular No. A-110.~~

~~III.~~a) ~~Fitness and quality being equal,~~ recycled products shall be considered for procurement in place of non-sustainable/recycled products set forth in the grantor's contract/agreement and~~, whenever such products are available at not more than~~ the approved budget~~cost of their non-recycle counterparts~~.

b) Procurement of goods or services for projects that receive external, federal funding, shall comply with the Office of Management and Budget (OMB) Uniform Guidance (2 CFR 200.317 through 200.326) sponsoring agency policies, and award terms and conditions, as applicable.

c) Procurement of goods or services for campus programs shall be procured according to this policy, approved by the authorized signer and comply with all CSUSM Corporation policies and procedures.

d) Procurement shall follow what is customary in the market place for a particular commodity or product and be consummated in such a manner so as to constitute a reasonably prudent and documented business transaction.

~~IV.~~e) ~~System-wide, volume~~~~Volume or pool purchase, annual~~ purchase agreements and State Purchasing contracts shall be utilized when deemed to be advantageous to CSUSM Corporation.

f) Purchases must comply with the letter and spirit of all laws applicable to CSUSM Corporation's business and interest including contract law, and anti-trust laws which prohibit price fixing resulting in the elimination of free competition. Purchases must also adhere to the requirements set forth in the grant or contract agreements.

No Corporation Board member, employee or CSU employee, by virtue of their position will violate the Corporation's Code of Conduct by deriving any benefit, gain or receive preferential treatment from the purchase of ~~**PURCHASE ORDER REQUEST PROCESS:**~~

g) ~~When purchasing~~ materials, supplies, equipment or services.

h) Violation of this policy or the Corporation's Code of Conduct may be cause for disciplinary action.

i) Execution of purchase orders, agreements, MOU and all binding contracts shall be consistent with signature authority resolution approved by~~and supplies from a vendor through CSUSM Corporation,~~ the CSUSM Corporation Board of Directors.~~Purchase Order is used.~~

j) The CSUSM Corporation Executive Director is charged with responsibility of implementing this policy.

II. Sole Source Purchases

~~Once the goods have been identified, the purchase should be evaluated to determine if competitive bids are required*~~

~~I. Guidelines for purchase of Materials, Equipment and Supplies:~~

~~a. Materials, Equipment and Supplies under $10,000~~
~~The authorized signer is required to submit a purchase order and a price quotation from the vender.~~

~~b. *Materials, Equipment and Supplies over $10,000~~
~~The authorized signer is required to submit a purchase order with a minimum of three price quotations attached from vendors.~~

~~c. *Materials, Equipment and Supplies over $50,000~~
~~The authorized signer is required to submit a purchase order with three formal bids from providers based on written specifications, which recognize competitive pricing, responsiveness to specifications, and reputation of vendors.~~

~~II. Guidelines for Purchase of Services:~~

~~a. *Services over $50,000~~

~~The authorized signer is required to submit a purchase order and/or contract with a minimum of three bids from providers based on written specifications, which recognize competitive pricing, responsiveness to specifications, and reputation of vendors.~~

~~*EXCLUDED FROM THE COMPETITIVE BID PROCESS ARE:~~

Sole source purchases exceeding $50,000, on a non-competitive basis will require written justification and approval by the CSUSM Corporation Executive Director or designee. Written. ~~The sole source written~~ justification ~~must~~should include the following:

~~I.~~a. Description of unique requirements and/or ~~Unique~~ performance factors of the product.~~products/services specified,~~

~~II.~~b. Why unique performance requirements/~~these~~ factors are required.~~,~~

c. What other products have been evaluated, and rejected, and the rational for the rejection.

d. Special circumstances requiring immediate action.

III. Methods of Procurement

Purchases under $5,000: may be approved by the appropriate approving authority. Price quotations are not required to be submitted.

Purchases between $5,000 and $49,999: must be approved by the appropriate approving authority and include three or more informal quotations provided in written or electronic form from the suppliers. Price quotations are required to be submitted.

~~III.~~ Purchases between $50,000 and 100,000: must be approved by the appropriate approving authority and include three or more formal quotations provided in written or electronic form from the suppliers. Formal Price quotations are required~~why~~

~~Grant/contract purchases governed by the terms~~ and must be approved by the Executive Director or designee.

Purchases greater than $100,001: must be approved by the appropriate approving authority and requires a formal Request for Proposal (RFP) or Request for Quotation (RFQ) be issued. Alternatively a system-wide or publically bid contract; or sole source may be used.~~conditions of the executed agreement.~~

Retention of service contractors on an hourly time and material basis are excluded from this process. ~~Authorized signer's approval must be obtained prior to the retention of service contractors.~~

EXCEPTIONS:

The Following are Exceptions to this Policy: Investment management services, insurance services, employee travel, legal services, artists, lecturers, speakers, caterers and real estate activity.

~~**CONFLICT OF INTEREST:**~~

~~No CSUSM Corporation Board member, employee, or CSU employee shall personally derive any benefit or gain or receive preferential treatment related to the purchase of equipment, supplies or services for CSUSM Corporation.~~

~~**MBE/WBE:**~~

~~Some funding agencies may require the use of a process that affirmatively seeks bids from women, minority, veteran or disabled-owned businesses. The CSUSM Corporation Project Director is required to seek such bids if specified in the award.~~

~~**RESTRICTIONS:**~~

~~The purchase of materials, equipment, supplies and services are subject to the following restrictions:~~

~~a. The purchase must be a reasonable, allocable and allowable charge.~~
~~b. If the charge for a funded project is not in the approved project budget, prior approval from the funding agency may be necessary.~~
~~c. Equipment purchases are generally secured using a purchase order to ensure proper handling, warranty (where appropriate), and recording for inventory purposes. If equipment is purchased and then submitted on a check request for reimbursement, CSUSM Corporation has the discretion not to approve the purchase if proper information is not received or proper bidding procedures were not followed.~~

~~Hazardous materials must be secured using a purchase order to ensure proper handling of the substances and University notification and approval.~~

RESOURCES:

Federal Regulations 2 CFR 200.317-.326 2 CFR 200 -- Procurement Standards
Uniform Guidance Frequently Asked Questions

Public Relations Policy
https://www.csusm.edu/corp/businesssrvcesandfinance/policies_proc_forms/pol_busserv_fin_acc/publicrelationsfundspolicy.pdf

Conflict of Interest
https://www.csusm.edu/corp/businesssrvcesandfinance/policies_proc_forms/pol_hrpr/corp202coiboardandemployeespolicy.pdf
~~d.~~

ATTACHMENT G

Revised Property Control Policy
(Tracked changes and clean version)

California State University SAN MARCOS | CSUSM Corporation

Policy #: 111 Total Pages: 2
Created: 03/28/02
Revision Date: 2/16; 06/07; 11/1/07; 8/23/16; 5/24/18 (draft)
Name Change Revision Date: 2009; 2/27/14; 7/1/17
Approved by: Board of Directors 8/23/16

PROPERTY CONTROL POLICY AND PROCEDURES

PURPOSE:

California State University San Marcos Corporation (CSUSM Corporation) has established guidelines for property purchases and donations and defined the responsibilities and obligations of CSUSM Corporation and its Project Directors in regard to the custody and control of property. This includes a biennial property verification program, the maintenance of accurate records, property identification (tagging) and guidelines for proper handling of property and related record keeping.

The Property Control Policy described below establishes a system used to identify and track property owned by or donated to CSUSM Corporation including but not limited to gifts of art/real estate, equipment used on research grants, computer/office equipment and furniture.

POLICY:

Property with a cost of $5,000 or more that benefit or provide services of one year or more will be capitalized, tracked, and tagged. Property with a cost of $2,500 or more that benefit or provide services of one year or more will be tagged and tracked but not capitalized. Property cost includes the purchase price plus all costs to acquire, install, and prepare the property for the intended use.

Property owned by CSUSM Corporation through the Office of Sponsored Projects (OSP) and Campus Programs require Principal Investigators (PI)/Project Directors (PD) be responsible for all property purchased for their project(s) and must report the location, transfer, trade-in, loss (theft), or non-use/obsolescence of the property to CSUSM Corporation using the Property Transfer Form. PI's/PD's will be required to follow the property control policy.

The PI/PD is responsible for the security and control of any property or equipment less than $2,500 (including theft sensitive items) in regard to recordkeeping, inventory, and safekeeping. Property and equipment with a cost of $2,500 or less will not be tagged.

The Executive Director or designee is responsible for the security and control of all other CSUSM Corporation owned property.

TAGGING AND TRACKING PROCEDURE:

CSUSM Corporation will utilize Campus Materials Management for property control services related to receiving, tagging, and inventory service needs. Whether an item is tagged or not will be determined by Materials Management utilizing CSUSM Corporation's criteria for Property Control.

PROPERTY CONTROL POLICY AND PROCEDURES

Materials Management will record all the pertinent information required within the property control database for property valued at $2,500 or more and be responsible for ensuring the physical tagging of the property.

Auxiliary Accounting will maintain records of property including acquisition costs, useful life, depreciation schedules, disposals, and reporting for Financials. Reconciliations shall be reviewed with CSUSM Corporation annually.

Donated property will be listed as "donated" in the property control database along with an estimated value and useful life.

BIENNIAL PROPERTY VERIFICATION PROGRAM:

As a part of the Biennial (every two years) Property Verification Program, Materials Management and the PI/PD will perform a physical count of all property tagged and tracked in the property control database. A Property Report will be issued to the appropriate PI/PD prior to the physical count at which time any corrections will be submitted to CSUSM Corporation. This verification program will take place in the third or fourth quarter of the Fiscal Year every two years.

SALES/DISPOSITIONS/TRANSFERS/STOLEN PROPERTY

I. CSUSM Corporation must give written authorization to the PI/PD to sell, dispose or transfer any property acquired through any grant.

II. OSP will, at the end of the project period/close out (depending on any further requirements of the funder), initiate the transfer of all capitalized equipment to CSUSM using the Property Transfer Form.

III. PI's/PD's must notify CSUSM Corporation of any transfers or disposals of property by using the Property Transfer Form. This includes lost, stolen or destroyed property.

The Executive Director or designee shall authorize the sale, disposition or transfer of all other CSUSM Corporation owned property.

Revision Dates: Remove procedural items, verification program frequency from biennial to triennial. OSP transfer property at Award close-out 2/16; 06/07; 11/1/07; Verification program frequency from triennial to biennial based on Uniform Guidance revisions 5/24/18 (DRAFT)

This policy was originally part of the "Fixed Asset and Property Control Policy." That policy was separated into two policies.

California State University SAN MARCOS | CSUSM Corporation

Policy #: 111 Total Pages: 2
Created: 03/28/02
Revision Date: 2/16; 06/07; 11/1/07; 8/23/16; 5/24/18 (draft)
Name Change Revision Date: 2009; 2/27/14; 7/1/17
Approved by: Board of Directors 8/23/16

PROPERTY CONTROL POLICY AND PROCEDURES

PURPOSE:

~~University Auxiliary and Research Services Corporation~~ California State University San Marcos Corporation (CSUSM Corporation) has established guidelines for property purchases and donations and defined the responsibilities and obligations of CSUSM Corporation and its Project Directors in regard to the custody and control of property. This includes a biennial property verification program, the maintenance of accurate records, property identification (tagging) and guidelines for proper handling of property and related record keeping.

The Property Control Policy described below establishes a system used to identify and track property owned by or donated to CSUSM Corporation including but not limited to gifts of art/real estate, equipment used on research grants, computer/office equipment and furniture.

POLICY:

Property with a cost of $5,000 or more that benefit or provide services of one year or more will be capitalized, tracked, and tagged. Property with a cost of $2,500 or more that benefit or provide services of one year or more will be tagged and tracked but not capitalized. Property cost includes the purchase price plus all costs to acquire, install, and prepare the property for the intended use.

Property owned by CSUSM Corporation through the Office of Sponsored Projects (OSP) and Campus Programs require ~~Project Directors~~ Principal Investigators (PI)/Project Directors (PD) be responsible for all property purchased for their project(s) and must report the location, transfer, trade-in, loss (theft), or non-use/obsolescence of the property to CSUSM Corporation using the Property Transfer Form. ~~Project Directors~~ PI's/PD's will be required to follow the property control policy.

The ~~Project Director~~ PI/PD is responsible for the security and control of any property or equipment less than $2,500 (including theft sensitive items) in regard to recordkeeping, inventory, and safekeeping. Property and equipment with a cost of $2,500 or less will not be tagged.

The Executive Director or designee is responsible for the security and control of all other CSUSM Corporation owned property.

TAGGING AND TRACKING PROCEDURE:

CSUSM Corporation will utilize Campus Materials Management for property control services related to receiving, tagging, and inventory service needs. Whether an item is tagged or not will

be determined by Materials Management utilizing CSUSM Corporation's criteria for Property Control.

Materials Management will record all the pertinent information required within the property control database for property valued at $2,500 or more and be responsible for ensuring the physical tagging of the property.

Auxiliary Accounting will maintain records of property including acquisition costs, useful life, depreciation schedules, disposals, and reporting for Financials. Reconciliations shall be reviewed with CSUSM Corporation annually.

Donated property will be listed as "donated" in the property control database along with an estimated value and useful life.

~~TRIENNIAL~~ BIENNIAL PROPERTY VERIFICATION PROGRAM:

As a part of the ~~Triennial~~ Biennial (every ~~three~~ two years) Property Verification Program, Materials Management and ~~Project Directors~~ the PI/PD will ~~do~~ perform a physical count of all property tagged and tracked in the property control database. A Property Report will be issued to the appropriate ~~Project Directors~~ PI/PD prior to the physical count at which time any corrections will be submitted to CSUSM Corporation. This verification program will take place in ~~March or April every three years.~~ the third or fourth quarter of the Fiscal Year every two years.

SALES/DISPOSITIONS/TRANSFERS/STOLEN PROPERTY

I. CSUSM Corporation must give written authorization to the ~~Project Director~~ PI/PD to sell, dispose or transfer any property acquired through any grant.

II. OSP will, at the end of the project period/close out (depending on any further requirements of the funder), initiate the transfer of all capitalized equipment to CSUSM using the Property Transfer Form.

III. ~~Project Directors~~PI's/PD's must notify CSUSM Corporation of any transfers or disposals of property by using the Property Transfer Form. This includes lost, stolen or destroyed property.

The Executive Director or designee shall authorize the sale, disposition or transfer of all other CSUSM Corporation owned property.

Revision Dates: Remove procedural items, verification program frequency from biennial to triennial. OSP transfer property at Award close-out 2/16; 06/07; 11/1/07; Verification program frequency from triennial to biennial based on Uniform Guidance revisions 5/24/18 (DRAFT)

This policy was originally part of the "Fixed Asset and Property Control Policy." That policy was separated into two policies.

ATTACHMENT H

Revised Post Retirement Benefit Policy
(Tracked changes and clean version)

(Proposal B)

California State University San Marcos Corporation
Post Retirement Health, Dental and Vision Care Benefits Plan

Summary

This plan, initially adopted in 2005, was updated effective January 1, 2015 at which time the plan was terminated with the exception of those meeting specific criteria. Individuals meeting this criteria would remain eligible under the Post Retirement Benefits Plan as long as they met all qualifications. This plan has been updated to include the recent name change and additional changes to the elgibility criteria effective June 1, 2018. The purpose of this plan is to describe the terms and conditions under which CSUSM Corporation provides post retirement health, dental and vision care benefits.

The premium contributions made by CSUSM Corporation under this plan may differ as described below under "Premium Contribution Rates". Upon retirement, an employee must meet all of the criteria described below in order to be eligible for the employer's premium contributions. Provisions of this plan and eligibility requirements that apply to all employees are described below.

Eligibility

Regular Employees as of December 31, 2014

Eligibility: Eligible employees are those who meet all of the following criteria at the time of retirement:

1. Employed by CSUSM Corporation as of December 31, 2014, as a Regular Employee as defined in the CSUSM Corporation Employee Handbook, with a minimum of 10 years of continuous service in this capacity and meeting the additional CSUSM Corporation employment criteria (a below only or b and c below).

    a) CSUSM Corporation Central staff enrolled in health benefits as of December 31, 2014
    b) Regular, benefited staff with 5 years or more service as a CSUSM Corporation Regular employee as of December 31, 2014
    c) Will reach the plan eligibility of 10 years of service and 65 years of age within the next 10 years (by 12/31/2028)

2. Retired and receiving income under the "CSUSM Corporation Defined Contribution Retirement Plan" offered through TIAA.

3. Attained age 65 while employed by CSUSM Corporation and enrolled in CSUSM Corporation health benefits. The age requirement is waived if the employee is retiring due to permanent total disability and is approved for benefits under the "Group Long Term Disability Benefits Plan for Regular Employees of CSUSM Corporation".

Premium Contributions

Premium Contribution Rates: CSUSM Corporation's premium contribution will be based upon the cost of the comprehensive plan for which the retiree has at termination. The minimum retiree contribution for individual coverage is the amount an active employee pays for individual coverage. The minimum retiree contribution for spousal or domestic partner coverage is the amount paid by an active employee to cover one dependent.

General Plan Provisions Applicable To All Eligible Retirees

Benefits and Plan Options: Eligible retirees have the same choice of health, dental and vision insurance providers offered to active employees, however, some plan differences may exist, depending upon the products made available by the carriers. For Medicare eligible retirees, plan benefits will be coordinated with Medicare using the Medicare "carve-out" approach. For plans where the Medicare "carve-out" approach is not an option, retirees eligible for Medicare are required to participate in the programs designed to integrate benefits with Medicare.

Dependent Coverage: Dependent coverage is available for legally married spouses who are married to the employee on the date of the employee's retirement. Effective July 1, 2005, coverage is also available to a retiree's same sex or opposite sex domestic partner who meets the definition of domestic partner and is able to certify the partnership as described in the Domestic Partner Guide and who is a domestic partner of the employee on the date of the employee's retirement. Dependent coverage is not provided for children or any other dependents.

TIAA Retirement (403(b) Defined Contribution Retirement Plan): To be eligible for the post-retiree benefit coverage, an employee must be retired and receiving benefits under the "CSUSM Corporation Defined Contribution Retirement Plan" offered through TIAA, or be retired under CSUSM Corporation's long term disability provisions. Continued eligibility for health, dental and vision insurance coverage is contingent upon the employee remaining retired or disabled.

Medicare Enrollment: Upon reaching the age of Medicare eligibility or becoming eligible for Medicare due to disability, retirees must enroll in both Parts A and B of Medicare. Retirees must convert to CSUSM Corporation provided health insurance that interfaces with both Parts A and B of Medicare.

Medicare Supplement: Retirees eligible for Medicare may choose not to participate in a CSUSM Corporation sponsored health plan and, instead, may participate in an individually obtained Medicare Supplement Plan, such as those offered through the American Association of Retired Persons (AARP). CSUSM Corporation will pay for the cost of an individual Medicare Supplement Plan up to the amount which would have been contributed to a CSUSM Corporation sponsored plan. Once the choice to terminate participation in a CSUSM Corporation sponsored health plan has been made, the retiree may not elect to later re-enroll in a CSUSM Corporation sponsored plan.

Years of Service: Credit for years of service under this plan is given for the period of time an employee is a Regular employee of CSUSM Corporation. Service credit is not counted for other

CSUSM Corporation employment such as employment as overload, or temporary or student employee. Credit is not given for employment with Cal State San Marcos. In the event that a Regular employee of CSUSM Corporation is rehired by the organization within a period of twelve months, prior eligible service will be counted towards the employee's years of service. If the break in service is longer than twelve months, prior service will not be counted even if the employee is re-employed into an eligible class. Time spent on an approved leave of absence will be counted towards the employee's years of service.

Funding Source: The source from which an eligible employee's benefits are paid must pre-fund the contingent liability for an employee's post retirement health, dental and vision insurance benefits in order for the employee to be eligible.

Administration Of This Plan

CSUSM Corporation is the Administrator of CSUSM Corporation's employee health, dental and vision plans and as such shall have the authority to control and manage the operation and administration of this plan, subject to the provisions of the applicable group insurance policies and service agreements. The Administrator has designated the CSUSM Corporation Human Resources Office to be responsible for enrolling eligible employees and distributing information on plan benefits.

Reservation Of Right To Change This Plan

CSUSM Corporation reserves the right to modify coverage, add or eliminate plan options, add or eliminate insurance carriers or providers, modify employer/employee/retiree contributions, cancel, modify or reduce this coverage, or to make any changes to this plan it may later deem necessary. Additionally, CSUSM Corporation may authorize the deletion of any group or program named in this plan, or the addition of any new group or program.

July 1, 2005
Updated March 2014
Updated January 2015
Updated July 2017 – Name Change Only
Proposed updated date of June 2018

(Proposal B)

California State University San Marcos Corporation
Post Retirement Health, Dental and Vision Care Benefits Plan

Summary

This plan, initially adopted in 2005, ~~referenced this corporation as California State University San Marcos Foundation, which was the previous name of University Auxiliary and Research Services Corporation (CSUSM Corporation) before a corporate name change to CSUSM Corporation became effective in 2009.~~ was updated effective January 1, 2015 at which time the plan was terminated with the exception of those meeting specific criteria. Individuals meeting this criteria would remain eligible under the Post Retirement Benefits Plan as long as they met all qualifications. This plan has been updated to include the recent name change and additional changes to the eligibility criteria effective June 1, 2018. The purpose of this plan is to describe the terms and conditions under which CSUSM Corporation provides post retirement health, dental and vision care benefits.

The premium contributions made by CSUSM Corporation under this plan may differ as described below under "Premium Contribution Rates". Upon retirement, an employee must meet all of the criteria described below in order to be eligible for the employer's premium contributions. Provisions of this plan and eligibility requirements that apply to all employees are described below.

Eligibility ~~and Premium Contributions~~

Regular Employees as of June 30, 2005 and forward

Eligibility: Eligible employees are those who meet all of the following criteria at the time of retirement:

1. Employed by CSUSM Corporation as of June 30, 2005 and forward, as a Regular Employee as defined in the CSUSM Corporation Employee Handbook, with a minimum of 10 years of continuous service in this capacity and meeting the additional CSUSM Corporation employment criteria (a below only or b and c below).

   a) CSUSM Corporation Central staff enrolled in health benefits as of December 31, 2014
   b) Regular, benefited staff with 5 years or more service as a CSUSM Corporation Regular employee as of December 31, 2014
   ~~b)~~c) Will reach the plan eligibility of 10 years of service and 65 years of age within the next 10 years (by 12/31/2028)

2. Retired and receiving income under the "CSUSM Corporation Defined Contribution Retirement Plan" offered through TIAA.

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3. Attained age 65 while employed by CSUSM Corporation and enrolled in CSUSM Corporation health benefits. The age requirement is waived if the employee is retiring due to permanent total disability and is approved for benefits under the "Group Long Term Disability Benefits Plan for Regular Employees of CSUSM Corporation".

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Premium Contributions

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Premium Contribution Rates: CSUSM Corporation's premium contribution will be based upon the cost of the comprehensive plan for which the retiree has at termination. The minimum retiree contribution for individual coverage is the amount an active employee pays for individual coverage. The minimum retiree contribution for spousal or domestic partner coverage is the amount paid by an active employee to cover one dependent.

General Plan Provisions Applicable To All Eligible Retirees

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Benefits and Plan Options: Eligible retirees have the same choice of health, dental and vision insurance providers offered to active employees, however, some plan differences may exist, depending upon the products made available by the carriers. For Medicare eligible retirees, plan benefits will be coordinated with Medicare using the Medicare "carve-out" approach. For plans where the Medicare "carve-out" approach is not an option, retirees eligible for Medicare are required to participate in the programs designed to integrate benefits with Medicare.

Dependent Coverage: Dependent coverage is available for legally married spouses who are married to the employee on the date of the employee's retirement. Effective July 1, 2005, coverage is also available to a retiree's same sex or opposite sex domestic partner who meets the definition of domestic partner and is able to certify the partnership as described in the Domestic Partner Guide and who is a domestic partner of the employee on the date of the employee's retirement. Dependent coverage is not provided for children or any other dependents.

TIAA Retirement (403(b) Defined Contribution Retirement Plan): To be eligible for ~~this~~ the post-retiree benefit coverage, an employee must be retired and receiving benefits under the "CSUSM Corporation Defined Contribution Retirement Plan" offered through TIAA, or be retired under CSUSM Corporation's long term disability provisions. Continued eligibility for health, dental and vision insurance coverage is contingent upon the employee remaining retired or disabled.

Medicare Enrollment: Upon reaching the age of Medicare eligibility or becoming eligible for Medicare due to disability, retirees must enroll in both Parts A and B of Medicare. Retirees must convert to CSUSM Corporation provided health insurance that interfaces with both Parts A and B of Medicare.

Medicare Supplement: Retirees eligible for Medicare may choose not to participate in a CSUSM Corporation sponsored health plan and, instead, may participate in an individually obtained Medicare Supplement Plan, such as those offered through the American Association of Retired

Persons (AARP). CSUSM Corporation will pay for the cost of an individual Medicare Supplement Plan up to the amount which would have been contributed to a CSUSM Corporation sponsored plan. Once the choice to terminate participation in a CSUSM Corporation sponsored health plan has been made, the retiree may not elect to later re-enroll in a CSUSM Corporation sponsored plan.

Years of Service: Credit for years of service under this plan is given for the period of time an employee is a Regular employee of CSUSM Corporation. Service credit is not counted for other CSUSM Corporation employment such as employment as overload, or temporary or student employee. Credit is not given for employment with Cal State San Marcos. In the event that a Regular employee of CSUSM Corporation is rehired by the organization within a period of twelve months, prior eligible service will be counted towards the employee's years of service. If the break in service is longer than twelve months, prior service will not be counted even if the employee is re-employed into an eligible class. Time spent on an approved leave of absence will be counted towards the employee's years of service.

Funding Source: The source from which an eligible employee's benefits are paid must pre-fund the contingent liability for an employee's post retirement health, dental and vision insurance benefits in order for the employee to be eligible.

Administration Of This Plan

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CSUSM Corporation is the Administrator of CSUSM Corporation's employee health, dental and vision plans and as such shall have the authority to control and manage the operation and administration of this plan, subject to the provisions of the applicable group insurance policies and service agreements. The Administrator has designated the CSUSM Corporation Human Resources Office to be responsible for enrolling eligible employees and distributing information on plan benefits.

Reservation Of Right To Change This Plan

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CSUSM Corporation reserves the right to modify coverage, add or eliminate plan options, add or eliminate insurance carriers or providers, modify employer/employee/retiree contributions, cancel, modify or reduce this coverage, or to make any changes to this plan it may later deem necessary. Additionally, CSUSM Corporation may authorize the deletion of any group or program named in this plan, or the addition of any new group or program.

July 1, 2005
Updated March 2014
Updated January 2015
Updated July 2017 – Name Change Only
Proposed updated date of June 2018

ATTACHMENT I

New Cost Principle Policy

California State University SAN MARCOS | CSUSM Corporation

Policy #: 305	Total Pages: 2
Created:	
Revision Date:	
Approved by:	
Effective Date:	

COST PRINCIPLES FOR SPONSORED PROJECTS POLICY

PURPOSE:

The purpose of this policy is to establish requirements for the appropriate charging of costs to sponsored projects administered by California State University San Marcos Corporation (CSUSM Corp). The Office of Sponsored Projects (OSP) is responsible and accountable for the appropriate post award administration of externally funded grants and contracts.

SCOPE:

All California State University San Marcos (CSUSM) colleges, departments, and centers conducting research, instruction, and/or other sponsored work under grants and other agreements managed by OSP are required to comply with this policy and does not apply to gifts, non-sponsored agreements and campus programs.

POLICY:

I. Charging Costs to Sponsored Projects

All costs charged to sponsored projects must be reasonable, allowable, properly allocable, and treated with consistency. All procedures and processes for charging costs to sponsored projects must be in compliance with the cost principles, standards of other sponsors, CSU policies, and award terms and conditions, as applicable. The federal Office of Management and Budget (OMB) Uniform Guidance contains the cost principles and guidelines followed by OSP when determining allowable costs on federally funded sponsored projects.

II. Criteria for Allowable Costs Charged to Sponsored Projects

OSP will develop and maintain procedures for ensuring that costs charged to sponsored awards are made with adequate justification and in a reasonable period of time. The allocation of costs will be explained and documented in accordance with the following four guiding principles or criteria. These criteria apply for both direct and indirect costs (including cost match). Except where otherwise authorized by statute, costs must meet the following criteria in order to be allowable under federal awards:

Allowability – Cost is permissible according to the terms and conditions of the sponsored agreement, according to CSUSM Corp policy, and applicable regulations.

Allocability – Cost provides "benefit" to the sponsored project.

Consistency – Costs are treated in the same manner under like circumstances.

Reasonableness – A prudent person would purchase the item at that price, is necessary for the performance of the activity.

III. Exceptions

In accordance with federal regulations (2 CFR Part 220, Section F6b(2) and Exhibit C) and requirements of other entities, there may be certain circumstances when costs that are normally treated as indirect can be directly charged to a sponsored project. For example, the salaries of administrative and clerical staff are normally treated as indirect costs. Direct charging of these costs may be appropriate where a project or activity explicitly budgets for administrative or clerical services and individuals involved can be specifically identified with the project or activity. The same could also apply to items such as office supplies, postage, local telephone costs, and membership fees.

Please note: Definitions are found in the CSUSM Corp policy definitions document. Words used will be underlined the first time they appear.

REFERENCES:

Code of Federal Regulations Title 2, Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards

Integrated CSU Administrative Manual (ICSUAM)

- ICSUAM §11000 Sponsored Programs Administration
- ICSUAM §11001.01 SP Policy Definitions
- ICSUAM §11002.01, General Policy Requirements for the Administration of Grants and Contracts in Support of Externally Funded Research and Sponsored Program Activities
- ICSUAM §11003.05, Allowable Costs

ATTACHMENT J

Compensation Administration Guidelines

CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION (CSUSM CORPORATION)
COMPENSATION ADMINISTRATION GUIDELINES
Effective July 1, 2018 – June 30, 2019

The CSUSM Corporation Board approves the following wage increase guidelines for CSUSM Corporation Regular Sponsored Project employees[1] subject to Principal Investigator approval and the availability of project funds (grant and contract funded employees only). The CSUSM Corporation Board further approves the following wage increase guidelines for CSUSM Corporation Regular Non-Sponsored Project employees[1] subject to Executive Director approval and funding availability (non-Sponsored Projects employees only).

1.) Salary adjustments are available for CSUSM Corporation Regular Sponsored Project employees subject to the following guidelines (Wage increase not to exceed 5.0 percent and items a – e below).

Wage increase not to exceed 5.0 percent

a. All adjustments will be calculated as a percentage of current annual gross wages and must be submitted on an Employment Authorization Form (EAF).

b. Increases will not be granted without the completion of an annual performance appraisal in the past year. Currently, annual performance appraisals are completed either on a fiscal year basis, project year basis, or position anniversary date. The annual performance appraisal schedule is decided by the Principal Investigator or Department Director and is communicated to the Director, Human Resources and Payroll Services.

c. Employees with a score of less than 3.00 (below expectations) on their annual performance appraisal will not be eligible for a performance-based adjustment.

d. Employees with less than 6 months of service during the performance appraisal period will not be eligible for a wage increase. This will only apply to annual performance appraisals completed on a fiscal year or project year basis.

e. Any employee determined to be significantly above the market rate for their position (15% or greater), will be excluded from receiving a wage increase.

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[1] The following categories are not covered by these guidelines: Student Assistant, Graduate Assistant, and University Faculty.

2.) Salary adjustments are available for CSUSM Corporation Regular Non-Sponsored Project employees subject to the following guidelines (Wage increase not to exceed 3.0 percent and items a - e below). Salary adjustments for all CSUSM Corporation Regular positions funded by Associated Students Incorporated (ASI) are subject to ASI's Board approval.

Wage increase not to exceed 3.0 percent

a. All adjustments will be calculated as a percentage of current annual gross wages and must be submitted on an Employment Authorization Form (EAF).

b. Increases will not be granted without the completion of an annual performance appraisal in the past year. Annual performance appraisals are completed either on a fiscal year basis, project year basis, or position anniversary date. The annual performance appraisal schedule will be decided by the Project or Department Director and will communicate this schedule to the CSUSM Corporation Director, Human Resources and Payroll Services.

c. Employees with a score of less than 3.00 (below expectations) on their annual performance appraisal will not be eligible for a performance-based adjustment.

d. Employees with less than 6 months of service during the performance appraisal period will not be eligible for a wage increase. This will only apply to annual performance appraisals completed on a fiscal year or project year basis.

e. Any employee determined to be significantly above the market rate for their position (15% or greater), will be excluded from receiving a wage increase.

All forms are available on CSUSM Corporation's website at www.csusm.edu/corp.

CSUSM CORPORATION COMPENSATION GUIDELINES SINCE FY 2008-09

	2008 - 09	2009 - 10	2010 - 11	2011 - 12	2012 - 13
CSUSM Corp Admin	Performance Up to 5.0%	Performance Up to 5.0%	Performance 0%	Performance 0.0%	Performance 0.0%
Projects/Grants	Up to 5.0%	Up to 5.0%	Up to 5.0%	Up to 5.0%	Up to 5.0%

	2013 - 14		2014 - 15		2015 - 16		2016 - 17		2017-18	
	GSI	Perf.	GSI	Perf.	GSI	Perf.	GSI	Perf.	GSI	Perf.
CSUSM Corp Admin	3.0%	0.0%	2.0%	0.0%	2.0%	0.0%	3.0%	0.0%	3.0%	0.0%
Projects/Grants	0.0%	Up to 5.0%	0.0%	Up to 5.0%	0.0%	Up to 5.0%	0.0%	Up to 5.0%	0.0%	Up to 5.0%

ATTACHMENT K

Quarterly Financial Report 3/31/18 & Summary

California State University San Marcos Corporation
Statement of Financial Position
March 31, 2018

	Balance 3/31/2018	Balance 12/31/2017	Quarter Increase/ (Decrease)
Assets			
Cash and Short-Term Investments	$ 10,913,652	$ 10,059,008	$ 854,644
Accounts Receivable-Sponsored Programs	2,354,416	2,976,389	(621,973)
Other Receivable	919,008	1,449,136	(530,128)
Other Assets	280,332	103,302	177,030
Housing Bldg & Equipment (Net)	18,353,147	18,465,977	(112,830)
CCF-Bldg & Fixtures (Net)	4,124,381	4,195,630	(71,249)
Property & Equipment (Net)	9,646,895	6,743,378	2,903,517
Total Assets	**$ 46,591,831**	**$ 43,992,820**	**$ 2,599,011**
Liabilities & Net Assets			
Liabilities:			
Accounts Payable and Accrued Expenses	$ 1,516,043	$ 1,759,527	$ (243,484)
Deferred Revenue	10,618,181	8,740,781	1,877,400
Notes Payable - CSUSM	198,291	198,291	-
Post-Retiree Health Benefit Accrual	1,525,318	1,504,995	20,323
Bond Payable - Housing	19,044,325	19,044,325	$ -
Total Liabilities	**$ 32,902,158**	**$ 31,247,919**	**$ 1,654,239**
Net Assets:			
Unrestricted:			
Operating Reserves	$ 2,072,104	$ 2,072,104	$ -
Campus/Designated Programs	2,646,351	2,478,597	167,754
Administrative Current Year Net Activity	403,900	449,803	(45,903)
Housing & Residential Life	4,085,830	3,214,525	871,305
CCF-Bldg & Fixtures	4,124,381	4,195,630	(71,249)
Property & Equipment	357,107	334,242	22,865
Total Net Assets	**$ 13,689,673**	**$ 12,744,901**	**$ 944,772**
Total Liabilities & Net Assets	**$ 46,591,831**	**$ 43,992,820**	**$ 2,599,011**

California State University San Marcos Corporation
Administrative Operating Summary
7/1/17 to 3/31/18

	Annual Budget FY 17/18	Quarter 3 1/1/18 to 3/31/18 Budget	Quarter 3 1/1/18 to 3/31/18 Actual	Quarter 3 1/1/18 to 3/31/18 Variance	Fiscal Year To Date 7/1/17 to 3/31/18 Budget	Fiscal Year To Date 7/1/17 to 3/31/18 Actual	Fiscal Year To Date 7/1/17 to 3/31/18 Variance	Comparison of Prior FYTD Actual to Current FYTD Actual: Prior FYTD 3/31/17	Current FYTD 3/31/18	% Increase (Decrease)
Revenue										
Net Grant/Contract Admin Fees	$ 898,449	$ 224,612	$ 224,612	$ -	$ 673,837	$ 673,837	$ -	$ 841,571	$ 673,837	-20%
Admin Fees - Campus Programs	135,000	33,750	21,141	(12,609)	101,250	84,282	(16,968)	179,350	84,282	-53%
Follett-Bookstore Commission	333,000	133,200	126,529	(6,671)	299,700	300,375	675	316,814	300,375	-5%
Sodexo Commission	100,000	25,000	84,676	59,676	75,000	84,676	9,676	-	84,676	-
Other Commercial Services Revenues	158,160	39,540	61,971	22,431	118,620	131,844	13,224	87,532	131,844	51%
Housing	498,000	124,500	124,500	-	373,500	373,500	-	-	373,500	-
Summer Conferences	150,710	-	-	-	150,710	150,710	-	-	150,710	-
Investment Income	30,000	7,500	5,305	(2,195)	22,500	37,295	14,795	78,725	37,295	-53%
Exchange of Value - CSUSM	243,552	60,888	61,088	200	182,664	182,664	-	333,750	182,664	-45%
Space Rental	31,380	-	-	-	31,380	31,380	-	104,319	31,380	-70%
Other Revenue	189,385	47,346	43,894	(3,452)	142,039	184,034	41,996	44,942	184,034	309%
Total Revenue	**$ 2,767,636**	**$ 696,337**	**$ 753,716**	**$ 57,380**	**$ 2,171,200**	**$ 2,234,597**	**$ 63,397**	**$ 1,987,003**	**$ 2,234,597**	12%
Post-Retirement	$ 81,292	$ 20,323	$ 20,323	$ -	$ 60,969	60,969	$ -	$ 120,932	60,969	-50%
Expenses: Admin Operations	2,394,448	598,612	779,297	(180,685)	1,795,836	1,769,728	26,108	1,349,847	1,769,728	31%
Net Operating Revenues	**$ 291,896**	**$ 77,402**	**$ (45,904)**	**$ (123,305)**	**$ 314,395**	**$ 403,900**	**$ 89,505**	**$ 516,224**	**$ 403,900**	-22%

California State University San Marcos Corporation
Program Revenue Activity Summary
7/1/17 to 3/31/18

Program Activity	Annual Budget FY17/18	Quarter 3 1/1/18 to 3/31/18 Budget	Quarter 3 1/1/18 to 3/31/18 Actual	Quarter 3 1/1/18 to 3/31/18 Variance	Fiscal Year To Date 7/1/17 - 3/31/18 Budget	Fiscal Year To Date 7/1/17 - 3/31/18 Actual	Fiscal Year To Date 7/1/17 - 3/31/18 Variance	Comparison of Prior FYTD Actual to Current FYTD Actual: Prior FYTD 3/31/17	Comparison of Prior FYTD Actual to Current FYTD Actual: Current FYTD 3/31/18	Comparison of Prior FYTD Actual to Current FYTD Actual: % Increase (Decrease)
Grants/Contracts										
Federal	$ 9,903,935	$ 2,475,984	$ 2,589,927	$ 113,944	$ 7,427,951	$ 7,234,208	$ (193,743)	$ 7,035,188	$ 7,234,208	3%
Other Grants/Contracts	1,096,065	274,016	260,738	(13,278)	822,049	965,988	143,939	682,668	965,988	42%
Total Grants/Contracts	**$ 11,000,000**	**$ 2,750,000**	**$ 2,850,665**	**$ 100,665**	**$ 8,250,000**	**$ 8,200,196**	**$ (49,804)**	**$ 7,717,856**	**$ 8,200,196**	6%
Campus/Designated Programs	**2,072,020**	**518,005**	**522,620**	**4,615**	**1,554,015**	**1,644,413**	**90,398**	**3,042,073**	**1,644,413**	-46%
Housing/Residential Life	**6,053,471**	**1,968,540**	**1,936,563**	**(31,978)**	**5,208,653**	**5,244,310**	**35,657**	**-**	**5,244,310**	-
Total Program Revenues	**$ 19,125,491**	**$ 5,236,545**	**$ 5,309,848**	**$ 73,303**	**$ 15,012,668**	**$ 15,088,919**	**$ 76,251**	**$ 10,759,929**	**$ 15,088,919**	40%

ATTACHMENT L

FY 18/19 Corporation Budget & Resolution

(Operating budget and Student Housing budget)

FY2018-2019 Budget
CSUSM CORPORATION

Administration - High-Level Summary	FY18-19 Budget	FY17-18 Budget	Variance
Total Revenues	2,721,057	2,767,636	(46,579)
Total Expenses	2,626,521	2,394,448	(232,073)
Net Income/(Net Loss) Before Post Retirement Expense	**94,537**	**373,188**	**(278,651)**
Post Retirement Expense	81,292	81,292	0
Net Income/(Net Loss) After Post Retirement Expense	**13,245**	**291,896**	**(278,651)**

Administration - Detailed Summary			
Account Category	**FY18-19 Budget**	**FY17-18 Budget**	**Variance**
Revenues			
Space Rental [a]	0	31,380	(31,380)
Summer Residents	90,000	105,182	(15,182)
Housing Allocation	498,000	498,000	0
Summer Conferences	90,000	150,710	(60,710)
Revenue from Investments [b]	30,000	30,000	0
Commercial Services [c]	698,185	668,163	30,022
Overhead Admin Fee	120,000	135,000	(15,000)
OSP Activities	906,400	898,449	7,951
EOV	280,972	243,552	37,420
Other	7,500	7,200	300
Total Revenues	**2,721,057**	**2,767,636**	**(46,579)**
Operating Expenses			
Regular Salaries and Wages	964,934	909,405	(55,529)
Benefits Group	378,906	274,222	(104,684)
Communications	9,979	9,688	(291)
Utilities Group	16,979	31,218	14,239
Travel	34,115	27,920	(6,195)
Capital Outlay Projects	150,000	0	(150,000)
State Pro Rata Charges Group	5,927	5,581	(346)
Contractual Services Group	168,400	170,570	2,170
Information Technology Costs	16,834	21,754	4,920
Services from Other Funds/Agencies Group	32,657	32,657	0
Misc. Operating Expenses [d]	572,790	841,433	268,643
Campus Support [e]	275,000	70,000	(205,000)
Total Operating Expenses	**2,626,521**	**2,394,448**	**(232,073)**
Net Income/(Net Loss) Before Post Retirement Expenses	**94,537**	**373,188**	**(278,651)**
Benefits Post Retirement Health	81,292	81,292	0
Net Income/(Net Loss) After Post Retirement Expenses	**13,245**	**291,896**	**(278,651)**

FY2018-2019 Budget
CSUSM CORPORATION - STUDENT HOUSING

Student Housing - Detailed Summary based on 95% occupancy			
Account Category	**FY18-19 Budget**	**FY17-18 Budget**	**Variance**
Revenues			
Rental income [f]	5,708,448	5,426,149	282,299
Operating Income	265,566	291,360	(25,794)
Total Revenues	**5,974,014**	**5,717,509**	**256,505**
Expenses			
Operating Expenses [g]	1,185,446	1,126,559	(58,887)
Salaries & Benefits [h]	658,660	583,093	(75,567)
Programs & Marketing (leasing) [i]	91,200	49,500	(41,700)
Management Fee	179,220	171,525	(7,695)
Allocation to CSUSM Corporation	498,000	498,000	0
Allocation to Residential Education Operations	320,400	335,000	14,600
Allocation to Residential Education Bed Spaces [j]	197,928	0	(197,928)
Loan Interest	851,750	891,750	40,000
Loan Principal	820,000	780,000	(40,000)
Campus Contribution	500,000	500,000	0
Total Expenses Before Amortization & Depreciation	**5,302,604**	**4,935,427**	**(367,178)**
Net Income/(Net Loss) Before Amortization & Depreciation	**671,410**	**782,082**	**(110,672)**

Student Housing Reserves	FY18-19 Budget	FY17-18 Budget	Variance
Beginning Balance (from previous Fiscal Year)	2,422,294	2,510,212	(87,918)
Add: Net Income Before Amortization & Depreciation	671,410	782,082	(110,672)
Less: Capital Expenditures	652,208	870,000	217,792
Ending Balance	**2,441,496**	**2,422,294**	**19,202**

Summary of FY18-19 Capital Expenditures	Amount
Building Elevator Upgrades	82,725
Building C Renovations	499,740
Fire Panel Replacement	13,000
Triple Space Conversion in UVA	56,742
Total	**652,208**

NOTES:

(a) Revenue reduction due to vacating Carmel Street location

(b) Projection of investment earnings for Corp Central only

(c) Commercial Partner Revenue - overall increase. Variance primarily due to increase in Sodexo commission (Agreement Amendment), Childcare Revenue Share increase, other Partners incremental increase, and decrease in Admin Fees projected

(d) Decrease in Rent expense due to move onto Campus at no cost for space until move to EL Bldg. ($155k), Business Financial Services agreement with Campus decrease (129k)

(e) Campus Contribution FY 18-19

(f) Rental Income will increase based on the addition of 32 beds in UVA when double rooms were turned into triples. FY 17-18 was based on 90% occupancy whereas FY 18-19 is based on 95% occupancy.

(g) Overall 5% increase in operating expenses due to increase in bed spaces and tenants. Other factors include increase in IITS, UPD, Utilities, and Insurance costs.

(h) COCM is taking on the hiring of Desk Assistants. This was previously a job under the RA job description.

(i) Increase in marketing materials and events due to unpredictable housing occupancy numbers. Increase also includes growth of summer conference program and affiliated expenses.

(j) University Village will be adding an additional $197,928 to their contribtion to Residential Education to cover the cost of the RD, RA, and RPM Bed spaces. This is an expense to Residential Education. This is the first year for showing the RD, RA, and RPM Bed spaces this way.

Detail for Page 1 (Project 81500 - Administration)

Account Category	FY18-19 Budget	FY17-18 Budget	Variance
Revenue			
504 - Sales and Services of Auxiliary Enterprises	**-**	**31,380**	**(31,380)**
504002 - Housing Revenue Other	-	-	-
504009 - Space Rental	-	31,380	(31,380)
505 - Reimbursements	**90,000**	**105,182**	**(15,182)**
505201 - Reimbursements External	90,000	105,182	(15,182)
506 - Transfers In From Other Funds/Appropriations	**548,000**	**541,099**	**6,901**
570531 - Tfr In - Housing Operations	498,000	498,000	-
570800 - Tfr In - 531 - Summer Conf-Aux	50,000	43,099	6,901
508 - Revenue from Investments	**30,000**	**30,000**	**-**
508812 - Rev from Other Invest Income	30,000	30,000	-
508813 - Rev from Reinvested Dividends	-	-	-
508814 - Rev from Realized/Unrealized	-	-	-
508815 - Rev from Investment Dividends	-	-	-
580 - Other Financial Sources	**2,053,057**	**2,059,976**	**(6,918)**
580005 - Project Revenue	83,000	77,003	5,997
580090 - Rev Other Miscellaneous	7,500	7,200	300
580861 - Rev Other Catering Fees	20,000	30,000	(10,000)
580865 - RevOtherCommissionsCoffeeCart	35,000	35,000	-
580866 - Rev Other Commissions ATM	14,160	14,160	-
580869 - Rev Other Commissions Follet	333,000	333,000	-
580870 - Rev Other Pepsi	65,000	61,500	3,500
580871 - Rev Other First Class Vending	18,025	17,500	525
580873 - Rev Other Overhead Admin Fee	120,000	135,000	(15,000)
580874 - Rev Other Indirect Cost	906,400	898,449	7,951
580879 - Rev Other EOV Aux	280,972	243,552	37,420
580885 - Rev Other Summer Conferences	40,000	107,612	(67,612)
580886 - Rev Other Commissions Sodexo	130,000	100,000	30,000
Total Revenue	**2,721,057**	**2,767,636**	**(46,579)**

Account Category	FY18-19 Budget	FY17-18 Budget	Variance
Operating Expenses			
601 - Regular Salaries and Wages	**964,934**	**909,405**	**(55,529)**
601824 - Salaries Auxiliary Staff	818,984	892,995	74,011
601826 - Salaries Aux Temp w/o leave	11,030	-	(11,030)
601827 - Salaries Aux Students	25,738	16,410	(9,328)
601828 - Sal Aux Reim to CSUSM	109,182	-	(109,182)
603 - Benefits Group	**460,198**	**355,514**	**(104,684)**
603805 - Ben Aux Reim to CSUSM	56,510	-	(56,510)
603806 - Benefits Alloc Auxiliary Staff	312,493	273,345	(39,148)
603808 - Benefits Alloc Temp w/o Leave	8,874	-	(8,874)
603809 - BenefitsAlloc Students	1,030	877	(153)
603813 - Benefits Post Retire Health	81,292	81,292	-
604 - Communications	**9,979**	**9,688**	**(291)**
604001 - Telephone Usage	9,979	9,688	(291)
605 - Utilities Group	**16,979**	**31,218**	**14,239**
605802 - Utilities Auxiliary	16,979	31,218	14,239
606 - Travel	**34,115**	**27,920**	**(6,195)**
606001 - Travel-In State	29,015	27,920	(1,095)
606002 - Travel-Out of State	5,100	-	(5,100)
607 - Capital Outlay Projects	**150,000**	**-**	**(150,000)**
607033 - Cap Outlay Construction Other	150,000	-	(150,000)
612 - State Pro Rata Charges Group	**5,927**	**5,581**	**(346)**
612001 - State Pro Rata Charges	5,927	5,581	(346)
613 - Contractual Services Group	**168,400**	**170,570**	**2,170**
613001 - Contractual Services	16,900	15,000	(1,900)

613806 - Contractual Services-Temp Agen	-	55,000	55,000
613807 - Cont Serv Legal	63,000	10,320	(52,680)
613810 - Cont Serv Auditing	83,000	83,250	250
613823 - Cont Serv IndependentContractr	5,500	7,000	1,500
616 - Information Technology Costs	**16,834**	**21,754**	**4,920**
616002 - Info Tech Hrdwre $2500 - $4999	12,000	17,061	5,061
616005 - Info Tech Misc < $2500	4,834	4,693	(141)
617 - Services from Other Funds/Agencies Group	**32,657**	**32,657**	-
617001 - Serv from Other Funds/Agencies	32,657	32,657	-
660 - Misc. Operating Expenses	**572,790**	**841,433**	**268,643**
660001 - Postage & Freight	1,785	1,700	(85)
660002 - Printing	300	250	(50)
660003 - SupSrv Other	14,935	14,500	(435)
660008 - Interest Charges	4,895	5,453	558
660010 - Insurance Premiums	41,500	37,802	(3,698)
660025 - Overhead Chancellor's Office	12,181	11,887	(294)
660041 - Space Rental	40,057	41,056	999
660090 - Other Expense	-	-	-
660805 - SupSrv Member/Subscrip/Sponsor	6,992	4,500	(2,492)
660818 - RecruitmentEmployee(NonFacult)	2,265	7,800	5,535
660820 - Other Hospitality	1,030	1,000	(30)
660835 - Other Rental/Lease Equipment	8,000	9,382	1,382
660848 - Other Taxes & Licenses	-	443	443
660851 - Other Bank Charges	9,270	9,000	(270)
660858 - Other Professional Development	1,000	2,137	1,137
660859 - Other Events	3,500	6,500	3,000
660869 - Postage & Freight - Fed Ex	-	100	100
660920 - SupSrv Facilities Services	1,500	1,500	-
660923 - SupSrv Business Service Fees	311,565	441,201	129,636
660924 - Other Aux Board Related	-	1,000	1,000
660930 - SupSrv Payroll Fees	67,620	50,000	(17,620)
660942 - Other Maint & Lease	-	-	-
660947 - Other Vendor Parking	-	100	100
660948 - SupSrv - Supplies Aux	9,396	9,122	(274)
660949 - SupServ - Services Aux	-	-	-
660956 - Commercial Ops Expenses	35,000	30,000	(5,000)
660960 - Space Rental--Aux Admin	-	155,000	155,000
680 - Operating Transfers Out	**275,000**	**70,000**	**(205,000)**
670801 - Transfer Out	275,000	70,000	(205,000)
Total Expenses	**2,707,813**	**2,475,740**	**(232,073)**
Net Income/(Net Loss)	**13,245**	**291,896**	**(278,652)**

ATTACHMENT M

Form 990 Tax Return FY 16/17

2016

990

PUBLIC

DISCLOSURE

** PUBLIC DISCLOSURE COPY **

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ **Do not enter social security numbers on this form as it may be made public.**

▶ **Information about Form 990 and its instructions is at *www.irs.gov/form990.***

OMB No. 1545-0047

2016

Open to Public Inspection

A For the 2016 calendar year, or tax year beginning JUL 1, 2016 **and ending** JUN 30, 2017

B Check if applicable:
- [X] Address change
- [X] Name change
- [ ] Initial return
- [ ] Final return/ terminated
- [ ] Amended return
- [ ] Application pending

C Name of organization
CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
441 LA MOREE

City or town, state or province, country, and ZIP or foreign postal code
SAN MARCOS, CA 92078

F Name and address of principal officer: BELLA NEWBERG
SAME AS C ABOVE

D Employer identification number
33-0397688

E Telephone number
760-750-4700

G Gross receipts $ 17,071,166.

H(a) Is this a group return for subordinates? [ ] Yes [X] No

H(b) Are all subordinates included? [ ] Yes [ ] No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ WWW.CSUSM.EDU/CORP

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation: 1990 **M** State of legal domicile: CA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: TO PROVIDE FINANCIAL AND PROGRAM ADMINISTRATIVE SUPPORT TO CALIFORNIA STATE UNIVERSITY SAN MARCOS.

2 Check this box ▶ [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	11
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	3
5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	666
6	Total number of volunteers (estimate if necessary)	6	42
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	9,838,625.	11,879,250.
9	Program service revenue (Part VIII, line 2g)	4,505,945.	4,488,485.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-44,033.	-13,377.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,780.	13,572.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	14,307,317.	16,367,930.
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,346,912.	2,075,936.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	8,272,382.	9,161,068.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,391,101.	4,554,872.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	14,010,395.	15,791,876.
19	Revenue less expenses. Subtract line 18 from line 12	296,922.	576,054.

		Beginning of Current Year	End of Year
Net Assets or Fund Balances			
20	Total assets (Part X, line 16)	13,030,707.	40,058,912.
21	Total liabilities (Part X, line 26)	5,189,699.	28,877,205.
22	Net assets or fund balances. Subtract line 21 from line 20	7,841,008.	11,181,707.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer — Date

▶ BELLA NEWBERG, EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
		04/02/18	[ ]	

Firm's name ▶ ALDRICH CPAS AND ADVISORS, LLP — Firm's EIN ▶

Firm's address ▶ 7676 HAZARD CENTER DRIVE, STE 1300
SAN DIEGO, CA 92108 — Phone no. (619) 810-4940

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III X

1 Briefly describe the organization's mission:
THE CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION IS A NON-PROFIT TAX EXEMPT ORGANIZATION ESTABLISHED TO PROVIDE ADMINISTRATIVE AND OTHER BUSINESS SERVICES TO CALIFORNIA STATE UNIVERSITY SAN MARCOS. SERVICES INCLUDE THE ADMINISTRATION OF RESEARCH AND TRAINING GRANT

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ..... X Yes ☐ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ..... ☐ Yes X No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 10,371,334. including grants of $ 1,966,555.) (Revenue $)
ADMINISTRATION OF RESEARCH AND TRAINING GRANTS AWARDED TO THE CAMPUS FACULTY FROM VARIOUS FEDERAL, STATE, AND OTHER GOVERNMENTAL AGENCIES AND PRIVATE FOUNDATIONS. FEDERAL GRANT REVENUES TOTALED $11.1 MILLION WHILE STATE AND LOCAL GOVERNMENT AGENCY GRANT REVENUES TOTALED $660,000. GRANTS AND AWARDS FROM PRIVATE FOUNDATIONS AND OTHER NON-GOVERNMENTAL ENTITIES TOTALED $104,000.

4b (Code:) (Expenses $ 3,094,426. including grants of $ 109,381.) (Revenue $ 3,961,335.)
PROVIDE FINANCIAL AND ADMINISTRATIVE SUPPORT SERVICES TO VARIOUS CAMPUS PROGRAMS AND ACTIVITIES INCLUDING STUDENT HOUSING AND ASSOCIATED STUDENT'S ORGANIZATIONS. OTHER CAMPUS PROGRAMS FOR WHICH SERVICES WERE PROVIDED INCLUDE FACULTY RESEARCH DEVELOPMENT AND VARIOUS COMMUNITY OUTREACH PROGRAMS.

4c (Code:) (Expenses $ including grants of $) (Revenue $ 527,150.)
OPERATIONS OF COMMERCIAL SERVICES INCLUDE CAMPUS FOOD SERVICE, BOOKSTORE, VENDING AND ATM SERVICE ACTIVITIES FOR THE STUDENTS, FACULTY AND STAFF OF CALIFORNIA STATE UNIVERSITY SAN MARCOS.

4d Other program services (Describe in Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ▶ 13,465,760.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36	X	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	245		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	666		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," to line 3b, provide an explanation in Schedule O*	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country: ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?	13a			
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	14b			

Part VI Governance, Management, and Disclosure *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI X

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	11		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ CA

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[X] Own website [ ] Another's website [X] Upon request [ ] Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶

CLINT ROBERTS, CONTROLLER - 760-750-4470

333 S. TWIN OAKS VALLEY ROAD, SAN MARCOS, CA 92096-0001

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MATTHEW J. CEPPI	3.00									
CHAIRMAN		X		X				0.	178,623.	55,479.
(2) SHARON WHITEHURST-PAYNE	1.00									
VICE CHAIRMAN		X		X				0.	0.	0.
(3) NEAL HOSS	1.00									
DIRECTOR		X		X				0.	234,074.	67,317.
(4) DR. LINDA L. HAWK	1.00									
DIRECTOR (TERM NOV 2016)		X						0.	224,368.	75,414.
(5) DR. GRAHAM OBEREM	1.00									
DIRECTOR		X						0.	237,507.	78,489.
(6) DAWNMARIE MYERS	1.00									
DIRECTOR		X						7,029.	0.	281.
(7) BRANDON LOSEY	1.00									
DIRECTOR		X						0.	0.	0.
(8) JASON SCHREIBER	1.00									
DIRECTOR		X						0.	88,719.	30,695.
(9) DAVID CHANG	1.00									
DIRECTOR		X						0.	0.	0.
(10) DR. CHARLES DE LEONE	1.00									
DIRECTOR		X						22,327.	112,310.	50,407.
(11) DR. REGINA EISENBACH	1.00									
DIRECTOR		X						0.	158,501.	59,930.
(12) CYNTHIA FENIMORE	40.00									
TREASURER/FINANCE DIRECTOR				X				87,452.	0.	34,981.
(13) BELLA NEWBERG	40.00									
SECRETARY/ EXECUTIVE DIREC				X				0.	151,487.	62,080.

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total ▶								116,808.	1,385,589.	515,073.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								116,808.	1,385,589.	515,073.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 0

		Yes	No
3	Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	11,774,868.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	104,382.			
	g Noncash contributions included in lines 1a-1f: $					
	h **Total.** Add lines 1a-1f		11,879,250.			
Program Service Revenue		**Business Code**				
	2a CAMPUS PROGRAMS	900099	3,961,335.	3,961,335.		
	b COMMISSIONS- BOOKSTORE	900099	354,723.	354,723.		
	c OTHER COMMISSIONS	900099	172,427.	172,427.		
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a-2f		4,488,485.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		14,339.			14,339.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
		(i) Real / (ii) Personal				
	6a Gross rents	139,092.				
	b Less: rental expenses	125,520.				
	c Rental income or (loss)	13,572.				
	d Net rental income or (loss)		13,572.			13,572.
		(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory	550,000.				
	b Less: cost or other basis and sales expenses	536,678. / 41,038.				
	c Gain or (loss)	13,322. / -41,038.				
	d Net gain or (loss)		-27,716.			-27,716.
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	a				
	b Less: direct expenses	b				
	c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances	a				
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
	Miscellaneous Revenue	**Business Code**				
	11a					
	b					
	c					
	d All other revenue					
	e **Total.** Add lines 11a-11d					
	12 **Total revenue.** See instructions.		16,367,930.	4,488,485.	0.	195.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	903,977.	903,977.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	1,171,959.	1,171,959.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	174,102.	174,102.		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	7,055,883.	6,400,378.	655,505.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	384,185.	384,185.		
9 Other employee benefits	1,098,639.	880,778.	217,861.	
10 Payroll taxes	448,259.	407,618.	40,641.	
11 Fees for services (non-employees):				
a Management				
b Legal	5,407.	4,789.	618.	
c Accounting	55,500.		55,500.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	1,992,994.	1,526,798.	466,196.	
12 Advertising and promotion	436.	436.		
13 Office expenses	533,874.	398,072.	135,802.	
14 Information technology	60,538.	60,538.		
15 Royalties				
16 Occupancy	56,279.	12,284.	43,995.	
17 Travel	417,282.	402,422.	14,860.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	368,312.	360,032.	8,280.	
20 Interest	5,453.		5,453.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	549,122.		549,122.	
23 Insurance	43,523.	60.	43,463.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PROGRAM EXPENSES	247,275.	247,275.		
b OTHER EXPENSES	148,332.	59,512.	88,820.	
c CATERING/MEALS	70,545.	70,545.		
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	15,791,876.	13,465,760.	2,326,116.	0.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		310,348.	1	5,913,162.
	2	Savings and temporary cash investments		1,476,791.	2	1,718,932.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		2,407,393.	4	3,880,292.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		20,012.	9	30,257.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 42,154,812.			
	b	Less: accumulated depreciation	10b 15,340,463.	6,931,611.	10c	26,814,349.
	11	Investments - publicly traded securities		1,823,471.	11	1,640,839.
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		61,081.	15	61,081.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		13,030,707.	16	40,058,912.
Liabilities	17	Accounts payable and accrued expenses		1,098,749.	17	3,819,400.
	18	Grants payable			18	
	19	Deferred revenue		2,144,605.	19	3,993,029.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		1,946,345.	25	21,064,776.
	26	**Total liabilities.** Add lines 17 through 25		5,189,699.	26	28,877,205.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☒ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		7,841,008.	27	11,181,707.
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		7,841,008.	33	11,181,707.
	34	Total liabilities and net assets/fund balances		13,030,707.	34	40,058,912.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI X

1	Total revenue (must equal Part VIII, column (A), line 12)	1	16,367,930.
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,791,876.
3	Revenue less expenses. Subtract line 2 from line 1	3	576,054.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,841,008.
5	Net unrealized gains (losses) on investments	5	71,046.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	2,693,599.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	11,181,707.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII .....

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☒ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	X	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at** *www.irs.gov/form990.*

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization	**Employer identification number**
CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION	33-0397688

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☒ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____

10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations .....

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	7527060.	7442507.	7442989.	9838625.	11879250.	44130431.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	7527060.	7442507.	7442989.	9838625.	11879250.	44130431.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						44130431.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	7527060.	7442507.	7442989.	9838625.	11879250.	44130431.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	193,040.	167,373.	145,952.	154,567.	153,431.	814,363.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	385,152.	376,193.				761,345.
11 **Total support.** Add lines 7 through 10						45706139.
12 Gross receipts from related activities, etc. (see instructions)					12	16,233,713.

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	96.55 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	95.35 %

16a **33 1/3% support test - 2016.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test - 2015.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2016.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2015.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2016** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2015** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***Part VI*** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in* ***Part VI,*** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* ***Part VI.***	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea* ***(see instructions).***

a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity. *Describe in Part VI how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test. ***Answer (a) and (b) below.***			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		
3	Parent of Supported Organizations. ***Answer (a) and (b) below.***			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI*** *the role played by the organization in this regard.*	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	**1**		
2 Recoveries of prior-year distributions	**2**		
3 Other gross income (see instructions)	**3**		
4 Add lines 1 through 3	**4**		
5 Depreciation and depletion	**5**		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	**6**		
7 Other expenses (see instructions)	**7**		
8 **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	**8**		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	**1a**		
b Average monthly cash balances	**1b**		
c Fair market value of other non-exempt-use assets	**1c**		
d **Total** (add lines 1a, 1b, and 1c)	**1d**		
e **Discount** claimed for blockage or other factors (explain in detail in **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	**2**		
3 Subtract line 2 from line 1d	**3**		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	**4**		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	**5**		
6 Multiply line 5 by .035	**6**		
7 Recoveries of prior-year distributions	**7**		
8 **Minimum Asset Amount** (add line 7 to line 6)	**8**		

Section C - Distributable Amount		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	**1**	
2 Enter 85% of line 1	**2**	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	**3**	
4 Enter greater of line 2 or line 3	**4**	
5 Income tax imposed in prior year	**5**	
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	**6**	

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** *(continued)*

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in **Part VI**). See instructions	
7	**Total annual distributions.** Add lines 1 through 6	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions	
9	Distributable amount for 2016 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016:			
a				
b				
c	From 2013			
d	From 2014			
e	From 2015			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7	**Excess distributions carryover to 2017.** Add lines 3j and 4c			
8	Breakdown of line 7:			
a				
b	Excess from 2013			
c	Excess from 2014			
d	Excess from 2015			
e	Excess from 2016			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

** PUBLIC DISCLOSURE COPY **

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at *www.irs.gov/form990* .

OMB No. 1545-0047

2016

Name of the organization
CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION

Employer identification number
33-0397688

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☒ 501(c)(3) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year ..... ▶ $ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION

Employer identification number
33-0397688

Part I **Contributors** (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		$ 3,540,069.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2		$ 1,967,213.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3		$ 3,523,962.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4		$ 285,665.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
5		$ 451,565.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
6		$ 502,457.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization
CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION

Employer identification number
33-0397688

Part I **Contributors** (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		$ 566,708.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
8		$ 609,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization: CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION

Employer identification number: 33-0397688

Part II **Noncash Property** (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		$	

Name of organization
CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION

Employer identification number
33-0397688

Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this info. once.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION

Employer identification number 33-0397688

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (e.g., recreation or education)
- ☐ Preservation of a historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ _____ %
c Temporarily restricted endowment ▶ _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		30,155,651.	9,583,455.	20,572,196.
c Leasehold improvements		5,400,975.	2,497,714.	2,903,261.
d Equipment		4,132,296.	3,259,294.	873,002.
e Other		2,465,890.		2,465,890.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				26,814,349.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) POST RETIREMENT BENEFITS	1,464,349.
(3) DUE TO RELATED ORGANIZATIONS	427,321.
(4) NOTE PAYABLE	198,291.
(5) LONG TERM DEBT FROM MERGED	
(6) ORGANIZATION	18,974,815.
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	21,064,776.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII [X]

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	17,345,280.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	71,046.		
b	Donated services and use of facilities	2b	780,784.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	125,520.		
e	Add lines **2a** through **2d**			2e	977,350.
3	Subtract line **2e** from line **1**			3	16,367,930.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	16,367,930.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	16,698,180.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	780,784.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	125,520.		
e	Add lines **2a** through **2d**			2e	906,304.
3	Subtract line **2e** from line **1**			3	15,791,876.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	15,791,876.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE ORGANIZATION FOLLOWS ACCOUNTING STANDARDS GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA RELATED TO THE RECOGNITION OF UNCERTAIN TAX POSITIONS. THE ORGANIZATION RECOGNIZES ACCRUED INTEREST AND PENALTIES ASSOCIATED WITH UNCERTAIN TAX POSITIONS AS PART OF THE STATEMENT OF ACTIVITIES, WHEN APPLICABLE. MANAGEMENT HAS DETERMINED THAT THE ORGANIZATION HAS NO UNCERTAIN TAX POSITIONS AS OF JUNE 30, 2017 AND 2016 AND THEREFORE NO AMOUNTS HAVE BEEN ACCRUED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RENT EXPENSE - NETTED TO REVENUE 125,520.

Part XIII Supplemental Information *(continued)*

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENT EXPENSE - NETTED TO REVENUE	125,520.

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990.***

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization: CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION

Employer identification number: 33-0397688

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CALIFORNIA STATE UNIVERSITY SAN MARCOS - 333 S. TWIN OAKS ROAD - SAN MARCOS, CA 92096	33-0535371	115	903,977.	0.			CAL STATE SAN MARCOS STUDENT SCHOLARSHIPS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... ▶ 1.

3 Enter total number of other organizations listed in the line 1 table ..... ▶ 0.

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
STIPENDS	2431	1,171,959.	0.		

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2

GRANTS GIVEN TO CSUSM ARE FOR STUDENT SCHOLARSHIPS AND THE UNIVERSITY MONITORS THE FUNDS GIVEN TO EACH STUDENT. THE FINANCIAL AID OFFICE OF THE UNIVERSITY QUALIFIES APPLICANTS FOR SCHOLARSHIPS BASED ON CRITERIA OVER WHICH CSUSM CORPORATION HAS NO CONTROL. EXPENDITURES ON GRANTS AND CONTRACTS ARE CLOSELY MONITORED BY THE CSUSM CORPORATION STAFF TO COMPLY WITH SPONSOR REQUIREMENTS.

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**

▶ **Attach to Form 990.**

▶ **Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990.***

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization: CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION

Employer identification number: 33-0397688

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (such as, maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☐ Compensation committee	☐ Written employment contract		
	☐ Independent compensation consultant	☐ Compensation survey or study		
	☐ Form 990 of other organizations	☐ Approval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MATTHEW J. CEPPI	(i)	0.	0.	0.	0.	0.	0.	0.
CHAIRMAN	(ii)	178,623.	0.	0.	46,111.	9,368.	234,102.	0.
(2) NEAL HOSS	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR	(ii)	234,074.	0.	0.	57,949.	9,368.	301,391.	0.
(3) DR. LINDA L. HAWK	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR (TERM NOV 2016)	(ii)	224,368.	0.	0.	57,894.	17,520.	299,782.	0.
(4) DR. GRAHAM OBEREM	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR	(ii)	237,507.	0.	0.	60,969.	17,520.	315,996.	0.
(5) DR. CHARLES DE LEONE	(i)	22,327.	0.	0.	0.	2,679.	25,006.	0.
DIRECTOR	(ii)	112,310.	0.	0.	24,784.	22,944.	160,038.	0.
(6) DR. REGINA EISENBACH	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR	(ii)	158,501.	0.	0.	40,888.	19,042.	218,431.	0.
(7) BELLA NEWBERG	(i)	0.	0.	0.	0.	0.	0.	0.
SECRETARY/ EXECUTIVE DIREC	(ii)	151,487.	0.	0.	38,946.	23,134.	213,567.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3:

THE OFFICERS LISTED ON SCHEDULE J ARE EMPLOYEES OF THE RELATED ORGANIZATION, CALIFORNIA STATE UNIVERSITY SAN MARCOS. THE RELATED ORGANIZATION HAS POLICIES IN PLACE WHICH ARE USED TO DETERMINE COMPENSATION.

SCHEDULE O (Form 990 or 990-EZ)	Supplemental Information to Form 990 or 990-EZ	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.	2016 Open to Public Inspection

Name of the organization	Employer identification number
CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION	33-0397688

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AWARDS TO CAMPUS FACULTY, AND OPERATION OF VARIOUS CAMPUS COMMERCIAL OPERATIONS INCLUDING THE BOOKSTORE AND FOOD SERVICES. OTHER SERVICES PROVIDED INCLUDE FINANCIAL MANAGEMENT SUPPORT TO OTHER CAMPUS ENTITIES AND PROGRAMS.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

UCORP'S STUDENT HOUSING FUNDS HAVE MERGED WITH THE ORGANIZATION. THOSE FUNDS ARE THE UNIVERSITY VILLAGE APARTMENTS (UVA) AND RESIDENTIAL LIFE OPERATIONS (RLO). ADDITIONALLY, VARIOUS CONTRACTS WILL BE ASSUMED BY THE ORGANIZATION. AFTER MERGING THE STUDENT HOUSING FUNDS, THE ORGANIZATION CHANGED ITS NAME TO THE CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION (CSUSM CORPORATION). THE REMAINING UCORP FUNDS HAVE BEEN TRANSFERRED TO THE UNIVERSITY.

THE ASSETS AND LIABILITIES RELATED TO THE STUDENT HOUSING FUNDS HAVE BEEN ALLOCATED TO THE CSUSM CORPORATION AS FOLLOWS AS OF JUNE 30, 2017:

$5,066,671	CASH AND CASH EQUIVALENTS
264,755	RECEIVABLES, NET OF ALLOWANCE
14,090	PREPAID EXPENSES
18,592,150	PROPERTY & EQUIPMENT, NET OF ACCUMULATED DEPRECIATION
23,937,666	TOTAL ASSETS

$2,269,252	CURRENT LIABILITY
18,974,815	LONG-TERM DEBT
21,244,067	TOTAL LIABILITIES

Name of the organization: CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION

Employer identification number: 33-0397688

2,693,599 NET ASSETS

FORM 990, PART VI, SECTION A, LINE 4:

ARTICLES OF INCORPORATION WERE RESTATED AND AMENDED DUE TO MERGER AND NAME CHANGE.

FORM 990, PART VI, SECTION B, LINE 11B:

AN ELECTRONIC FORM OF THE 990 IS EMAILED TO EACH BOARD MEMBER PRIOR TO FILING. THE FORM 990 IS ALSO REVIEWED BY THE EXECUTIVE DIRECTOR PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

AT THE BEGINNING OF EACH FISCAL YEAR ALL MEMBERS OF THE AUXILIARY'S BOARD OF DIRECTORS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST STATEMENT. THIS POLICY ALSO APPLIES TO ALL DIRECTOR LEVEL POSITIONS, INCLUDING THE EXECUTIVE DIRECTOR, AND ALL OTHER POSITIONS THAT HAVE SIGNIFICANT EXPOSURE AND/OR DECISION MAKING AUTHORITY TO WARRANT REGULAR MONITORING OF THE CONFLICT OF INTEREST ACTIVITIES.

FORM 990, PART VI, SECTION B, LINE 15:

SOME OF THE ORGANIZATION'S OFFICERS ARE EMPLOYEES OF THE RELATED ORGANIZATION, CALIFORNIA STATE UNIVERSITY SAN MARCOS. THE RELATED ORGANIZATION HAS POLICIES IN PLACE WHICH ARE USED TO DETERMINE COMPENSATION. THE EXECUTIVE EMPLOYEE'S SALARY IS INCLUDED WITH THE ORGANIZATION'S FISCAL YEAR OPERATING BUDGET, WHICH IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION C, LINE 19:

Name of the organization: CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION

Employer identification number: 33-0397688

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FINANCIAL STATEMENTS, AND FORMS 990 (FROM THE PREVIOUS NINE YEARS) ARE AVAILABLE FOR INSPECTION OR COPYING AT THE ORGANIZATION'S MAIN OFFICE DURING NORMAL BUSINESS HOURS WITHOUT INQUIRING AS TO THE REASON FOR THE PUBLIC INSPECTION REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONTRACTUAL SERVICES:

PROGRAM SERVICE EXPENSES	661,956.
MANAGEMENT AND GENERAL EXPENSES	12,412.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	674,368.

BUSINESS SERVICES:

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	392,400.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	392,400.

ADMINISTRATIVE FEES:

PROGRAM SERVICE EXPENSES	697,192.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	697,192.

PAYROLL SERVICE FEES:

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	61,384.
FUNDRAISING EXPENSES	0.

Name of the organization CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION

Employer identification number 33-0397688

TOTAL EXPENSES	61,384.
SUBCONTRACTORS:	
PROGRAM SERVICE EXPENSES	167,650.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	167,650.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,992,994.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
NET ASSETS TRANSFERRED FROM MERGED ORGANIZATION	2,693,599.

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization: CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION

Employer identification number: 33-0397688

Part I **Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) Section 512(b)(13) controlled entity? No
CALIFORNIA STATE UNIVERSITY SAN MARCOS - 33-0535371, 333 S. TWIN OAKS VALLEY ROAD, SAN MARCOS, CA 92096	CALIFORNIA STATE UNIVERSITY- HIGHER EDUCATIONAL INSTITUTION	CALIFORNIA	115				X
SAN MARCOS UNIVERSITY CORPORATION - 33-0971982, 333 S. TWIN OAKS VALLEY ROAD, SAN MARCOS, CA 92096	ON-CAMPUS PROGRAM MANAGEMENT	CALIFORNIA	501(C)(3)	LINE 5			X
ASSOCIATED STUDENTS, INC. CALIFORNIA STATE UNIVERSITY SAN MARCOS - 33-055691, 333 S. TWIN OAKS VALLEY ROAD, SAN MARCOS, CA 92096	STUDENT LEADERSHIP, ACTIVITIES, & RECREATION	CALIFORNIA	501(C)(3)	LINE 5			X
CALIFORNIA STATE UNIVERSITY SAN MARCOS FOUNDATION - 80-0390564, 333 S. TWIN OAKS VALLEY ROAD, SAN MARCOS, CA 92096	FUNDRAISING & GRANTS ADMINISTRATION	CALIFORNIA	501(C)(3)	LINE 5			X

Part III **Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No

Part V **Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to related organization(s)	1b		X
c Gift, grant, or capital contribution from related organization(s)	1c		X
d Loans or loan guarantees to or for related organization(s)	1d		X
e Loans or loan guarantees by related organization(s)	1e	X	
f Dividends from related organization(s)	1f		X
g Sale of assets to related organization(s)	1g		X
h Purchase of assets from related organization(s)	1h		X
i Exchange of assets with related organization(s)	1i		X
j Lease of facilities, equipment, or other assets to related organization(s)	1j	X	
k Lease of facilities, equipment, or other assets from related organization(s)	1k	X	
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
o Sharing of paid employees with related organization(s)	1o	X	
p Reimbursement paid to related organization(s) for expenses	1p	X	
q Reimbursement paid by related organization(s) for expenses	1q	X	
r Other transfer of cash or property to related organization(s)	1r		X
s Other transfer of cash or property from related organization(s)	1s	X	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) CALIFORNIA STATE UNIVERSITY SAN MARCOS	P	3,305,999.	COST REIMBURSEMENT
(2) CALIFORNIA STATE UNIVERSITY SAN MARCOS	Q	3,471,015.	COST OF SERVICES
(3)			
(4)			
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) NO	(k) Percentage ownership

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

Form **8868**
(Rev. January 2017)

Department of the Treasury
Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**

▶ **Information about Form 8868 and its instructions is at *www.irs.gov/form8868* .**

OMB No. 1545-1709

Electronic filing *(e-file).* You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/efile*, click on Charities & Non-Profits, and click on *e-file* for *Charities and Non-Profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number

Type or print

File by the due date for filing your return. See instructions.

Name of exempt organization or other filer, see instructions.
CALIFORNIA STATE UNIVERSITY SAN MARCOS CORPORATION

Employer identification number (EIN) or
33-0397688

Number, street, and room or suite no. If a P.O. box, see instructions.
441 LA MOREE

Social security number (SSN)

City, town or post office, state, and ZIP code. For a foreign address, see instructions.
SAN MARCOS, CA 92078

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ CLINT ROBERTS, CONTROLLER
333 S. TWIN OAKS VALLEY ROAD - SAN MARCOS, CA 92096-0001
Telephone No. ▶ 760-750-4470 Fax No. ▶
- If the organization does not have an office or place of business in the United States, check this box ..... ▶ ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ▶ ☐. If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 15, 2018, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ ☐ calendar year _____ or
▶ ☒ tax year beginning JUL 1, 2016, and ending JUN 30, 2017.

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	**3a**	$	0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	**3b**	$	0.
c	**Balance due.** Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	**3c**	$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see instructions.** Form **8868** (Rev. 1-2017)

623841 01-11-17

ATTACHMENT N

Bio - Becky Calica

Becky Calica
Bio

My name is Becky Calica and I am a fourth year Psychology major and first year Resident Advisor. In addition to being a Resident Advisor, I was a part of Orientation Team in the summer of 2017 and am currently the Vice President of Active Minds at CSUSM. I have been on the Dean's List for three semesters and recently received an award for being a Civility Champion. I transferred to Cal State San Marcos in 2016 from Mount San Jacinto College in Menifee, CA. I have lived on campus since I transferred schools. Thus far, it has been an incredible experience. It has provided me with an opportunity to build community relationships and become close to my fellow students.

ATTACHMENT O

Sponsored Projects Committee Charge
And
Bios – Dr. Ana Hernandez and Dr. Keith Trujillo

California State University SAN MARCOS | CSUSM Corporation

Sponsored Projects Committee Charge

Background and Purpose

In order to provide appropriate levels of service and assistance to the University in seeking grant proposals and in administering grant awards, California State University San Marcos Corporation (CSUSM Corporation) establishes financial goals and policies for administration of grants. CSUSM Corporation works closely with the University's Associate Vice President for Research in establishing goals and policies and/or procedures, particularly when the policies and/or procedures require review by University administration.

Delegation of Authority and Responsibility

The Board delegates to the Sponsored Projects Committee the responsibility to recommend financial goals to the CSUSM Corporation Board of Directors for externally-funded projects and to periodically review policies and procedures which affect CSUSM Corporation and/or University in the areas of grants development or administration.

The Sponsored Projects Committee will review, with the assistance of CSUSM Corporation management and staff, the financial level of proposed and awarded externally-funded projects and the administrative policies and procedures affecting grant development and administration. The Sponsored Projects Committee will have at least one meeting per semester and will report and make recommendations at Board meetings.

Sponsored Projects Committee Membership

Membership will consist of at least three CSUSM Corporation Board members, the University's Associate Vice President for Research, the Executive Director of CSUSM Corporation, and may have two voting, non-Board members who are internal to the University. The committee will be staffed by CSUSM Corporation. The meeting quorum consists of 50% of the committee membership.

Approved at the Board of Directors Meeting 091417
Rev. 8/30/17 Name Change and additional updates
Rev. 1/14/09 *Corporation and department name changes only*
Rev. 3/19/04

Dr. Ana Hernandez
Bio

Dr. Ana Hernández is Associate Professor of Multilingual and Multicultural Education in the School of Education at CA State University San Marcos. She is program coordinator for the Bilingual Authorization, Online Dual Language Certificate, and Multicultural Specialist Certificate. In addition, she is co-coordinator of the Multiple Subject Credential program, and the director and principal investigator of Project ACCEPT – *Aligning the Common Core for English Learners, Parents and Teachers* – a US Department of Education National Professional Development Grant for preservice and inservice teachers in dual language education. She earned a doctorate in Educational Leadership from the Joint Doctoral Program at the University of California in San Diego and CA State University San Marcos.

Her work in bilingual teacher preparation stems from 32 years of teaching in California public schools as a bilingual/dual language teacher in grades K-8th. In higher education, she involves her teacher candidates in community engaged scholarship, global networks, and social justice and equity action plans. Dr. Hernández's research examines instructional practices and cross-cultural equity in dual language education. Her publications have been featured in a variety of peer reviewed journals and edited books. She is one of the founders and past-President of the Association for Two-Way and Dual Language Education (ATDLE) and an active member of ATDLE's Advisory Committee. In addition, she is a consultant for dual language education.

In her career, she has received various awards, including the CSU Chancellor's Doctoral Incentive Program, San Diego County Office of Education's Innovative Video in Education (iVIE) Award, CSUSM's Distinguished Teacher in Residence, CA Association for Bilingual Education State Teacher of the Year, and Valley Center-Pauma Unified School District's Teacher of the Year.

Dr. Keith Trujillo
Bio

Dr. Keith Trujillo is Professor of Psychology and Director of the Office for Training, Research and Education in the Sciences (OTRES) at California State University San Marcos (CSUSM). He received an Associates degree in Biological Sciences from Shasta College, Bachelors degrees in Biology, Psychology and Chemistry from California State University, Chico, and a doctoral degree in Pharmacology and Toxicology from the University of California Irvine. He then performed research and taught at the University of Michigan before arriving at California State University San Marcos in 1994.

Dr. Trujillo is a psychopharmacologist and behavioral neuroscientist with research interests in the neurobiology of emotion and the effects of drugs on the brain and behavior. His research, published in the journal *Science* on the discovery of the role of the neurotransmitter glutamate in opiate tolerance and dependence has been ranked as one of the most highly cited papers in the field of pain and analgesia and has been named a "citation classic."

Dr. Trujillo is a national leader at increasing diversity in the sciences. He is Director of MARC (Minority Access to Research Careers) and RISE (Research Initiative for Scientific Enhancement) programs at CSUSM, both funded by the National Institute of General Medical Sciences. He is also Co-Director of an LSAMP (Louis Stokes Alliance for Minority Participation) project at CSUSM, funded by the National Science Foundation and the California State University System. He has also been a leader in national programs working to increase diversity in science at the Society for Neuroscience, the Marine Biological Laboratory, the National Hispanic Science Network and others.

Dr. Trujillo has received more than $12 million in grant funding for his research and for his work to prepare students for careers in the sciences. He has been recognized with multiple awards for his work. In 2001 he received the President's Award for Scholarly and Creative Activity from CSUSM; in 2003 he received the National Award for Research from the National Hispanic Science Network; in 2005 he received the National Award of Excellence in Mentorship from the National Hispanic Science Network; in 2013 he received the Award for Education in Neuroscience from the Society for Neuroscience; and in 2017 he received the Wang Family Excellence Outstanding Faculty Award from the California State University System, the highest honor for a faculty member in the CSU System. In 2017 he was elected as a Fellow of the American Association for the Advancement of Science (AAAS), the world's largest multidisciplinary scientific society and a leading publisher of cutting-edge research.

ATTACHMENT P

Proposed FY 18/19 Meeting Calendar

CSUSM
Corporation

Proposed BOARD OF DIRECTORS
FY 18/19 Meeting Calendar

Location: Center for Children and Families Classroom
Meeting Time: 4:00 p.m. – 5:30 p.m.

Thursday, September 27, 2018 (Annual Meeting)

Thursday, November 15, 2018

Thursday, February 21, 2019

Thursday, May 23, 2019

Pending Approval by the Board of Directors at the 05/24/18 meeting